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NISBET, W.

The clinical guide

1) Pt. III

2) Pt. IV

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THE
CLINICAL GUIDE;

PART IV.

CONTAINING
THE TREATMENT

AND
Diseases of Infancy and Childhood:

WITH
A VIEW OF NOSOLOGY.



2.
THE
CLINICAL GUIDE;

OR, A

CONCISE VIEW

OF THE LEADING FACTS ON THE HISTORY, NATURE,
AND TREATMENT,

OF THE

STATE AND DISEASES

OF

INFANCY AND CHILDHOOD.

WITH AN APPROPRIATE

PHARMACOPŒIA,

*Divided into Three Parts, viz. Materia Medica, Classification,
and Extemporaneous Prescription:*

INTENDED AS

A MEMORANDUM-BOOK FOR PRACTITIONERS.

TO WHICH IS SUBJOINED,

AN INTRODUCTION TO NOSOLOGY;

OR, A VIEW OF

THE MOST APPROVED NOSOLOGICAL SYSTEMS,

PARTICULARLY THAT OF THE LATE DR. CULLEN;

Adapted, with certain Alterations, to

THE PRESENT WORK.

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SURGEONS TO THE ROYAL INFIRMARY; NOW OF LONDON.

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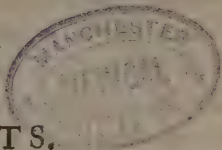
P R E F A C E.

THE medical treatment of Diseases of Infancy, though a subject of much importance in practice, has only of late had that attention paid to it by physicians that it merited: the works, therefore, on this department of medicine, are few in number, and their limits not so far extended as the variety of subjects occurring in the routine of infant practice warrants. Having, in the former volumes of this work, gone through a general detail of practice in medicine, surgery, and midwifery, it seemed to remain unfinished while the state of infancy, and its diseases, did not meet the same detail: an additional volume, therefore, to contain the Treatment and Diseases of Infancy, was deemed proper to complete the plan; and that is now offered to the Public, it is hoped in such a manner as to be equally useful with the other parts of the work.

This volume contains also a View of Nosology; a part too little attended to, and from his knowledge of which chiefly, or his just discrimination of the nature of diseases from external appearance, the reputation of a physician should properly be estimated. The system of Dr. Cullen is adopted, with such alterations as it is hoped will render it still more useful; and with references to the diseases, as treated in this and the preceding volumes.

St. James's-street,

Sept. 20, 1800.



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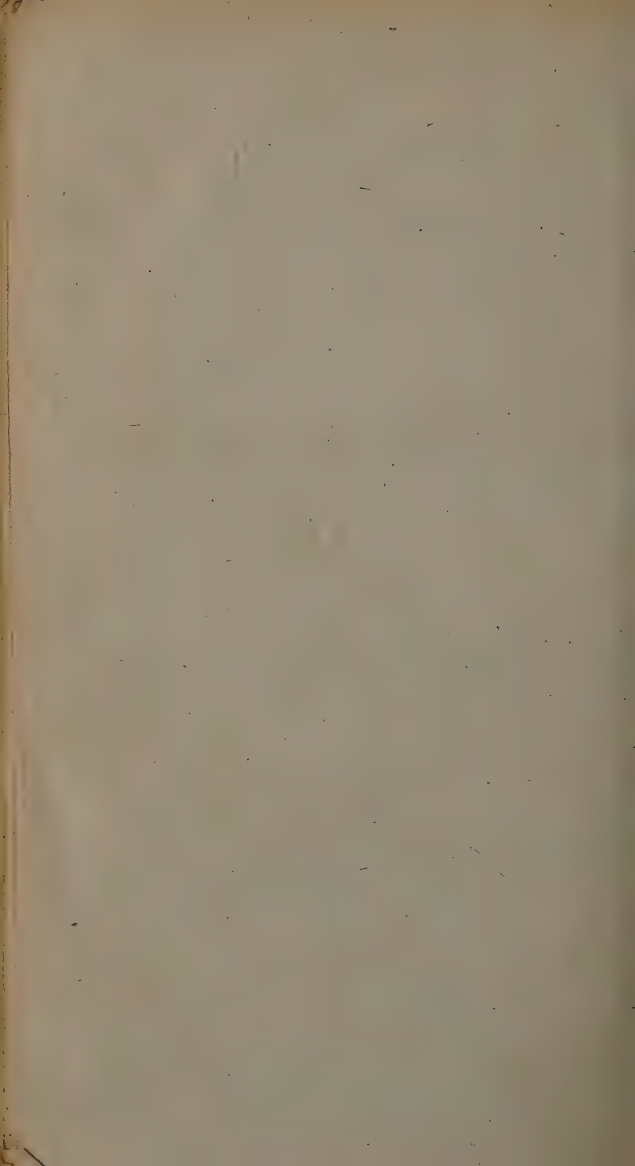
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INTRODUCTION.

I. **H**EALTH consists in the several parts of the body enjoying their particular functions; and as these functions are found more or less complete at birth, the tendency to future health or disease becomes, in consequence, coeval with life.

II. The functions of the system, at birth, differ in some respects from what afterwards take place; and in order to understand this difference, a previous consideration of the foetal state, or that imperfect existence which precedes birth, and the peculiarities which attend it, it is necessary to be acquainted with.

III. From the view of the formation of the uterine contents, formerly detailed (vide vol. iii. p. 26), the life of the foetus may be divided into three periods, drawn both from its apparent state of existence and its mode of nutrition.

IV. With respect to the former, we observe, that from the first detection of the foetus, to the period when the punctum saliens appears, it enjoys entirely, as far as can be traced, a state of vegetable existence, which may be termed the period of simple animation; from the appearance again of the punctum saliens to the period of motion, when the mother herself is conscious of its existence, may be named the period of incomplete animal life; and from these first faint motions of the foetus, which gradually increase and become stronger, to the time of gestation, may be considered as the period of complete animal formation.

V. In regard to the latter, or mode of nutrition, the same division is allowable; for, on considering the state of the foetus, at first, the connection between the vegetable and animal kingdom seems strongly supported: its nourishment it seems to receive originally from the surface; and it is not until the umbilical vessels are fully formed that the mode of nutrition is altered. Hence, during the first period, similar to simple vegetable life, it draws its nourishment from the surface or surrounding fluids, and betrays no evident marks of existence. The second period may be viewed as that of limited animal life, when it gives proofs of its possession of it, but when its powers are still so contracted as to be incapable of forming nourishment for its support, but receives it through certain vessels of the system of the mother; and the third period is that of the full or complete possession of the animal powers, when it is separated from its connection with the parent, and the necessary changes in its frame occur, fitting it for supporting life.

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VI. To judge of the necessary changes that then take place in the system of the foetus, its peculiarities, or difference of structure from the adult, fall to be noticed. These peculiarities, though more obviously displayed in its circulation, may yet be traced through every part of its system; and they may, therefore, be divided into those which seem intended merely to adapt it to its situation, and into those which have also a certain influence on its passage to delivery.

The former consist in,

1. The different course of its circulation; and
2. The state of particular organs; and

The latter, in the different connection of its more solid parts.

Fœtal Circulation.

VII. In describing the course of its circulation, the placenta possesses, we observe, at its surface next the child, one large vein, which, running along the umbilical cord, composes the principal share of it, and, entering the navel of the foetus, terminates in the vena portarum. In order, however, to prevent the whole blood sent by the placenta from circulating through the liver, which, as being poured into the vena portarum, it would do, a communication between the latter and the vena cava, peculiar to the foetus, is formed; and in this way part of the blood is allowed to take a different course, or to pass directly into the cava: from the vena cava the blood is sent to the right auricle of the heart; and in the adult, from the right auricle it is all discharged into the right ventricle. But instead of this, in the foetus, a communication between the two auricles takes place, by a sort of orifice covered with a valve, which is named,

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from its appearance, the foramen ovale. By this means one half of the fluid, which should naturally pass into the right ventricle, and from that into the pulmonary artery, to circulate through the substance of the lungs, by passing immediately into the left auricle, is directed into the aorta, and the pulmonary artery is still farther deprived of its proportion of circulation to the lungs, by another communication peculiar to the foetus taking place between it and the aorta; so that in this way, on a gross calculation, by the communication between the auricles, the lungs are deprived, we may suppose, of nearly one half their circulation, compared with the quantity of fluid that passes into their substance after birth; and by the second communication, between the pulmonary artery and aorta, they are deprived of a part more; so that only one-fourth of their proper circulation is admitted into them, or merely what is sufficient to preserve their vitality, similar to any other part possessing no peculiar or important function. The blood then passing in these ways into the aorta, is distributed through the body; and that portion of it entering the internal iliac arteries, which, in the foetal state, are larger than the external, contrary to what happens in the adult, is directed into two branches arising from them, peculiar to the foetus, which, piercing the navel, form the umbilical arteries, and carry the foetal blood to be transmitted through the circulation of the placenta, where it is supposed to receive certain necessary changes, adequate to what arise from the use of respiration after birth.

VIII. Though this is the most common opinion of the course of the foetal circulation, yet many objections have been urged, by different authors, against it.

The first that deserves attention is that proposed by Mr. MERY, in the Memoirs of the Royal Academy of Surgery, who observes, that the capacity of the pulmonary artery is larger than that of the aorta in the foetal state; that the right ventricle is more capacious than the left; and that the pulmonary veins are much smaller than the branches of the vena cava. From these observations he infers, that did the circulation proceed in the manner explained, the capacity of the left auricle should be superior to that of the right, and that the aorta should be larger than the pulmonary artery: but as this is not the case, he is led to believe that the blood must pursue a different route. The blood then, being received from the vena cava into the right auricle, is pushed from it into the ventricle; from the ventricle it is directed into the pulmonary artery; and by the latter is distributed through the substance of the lungs, except where part of it passes into the canalis arteriosus, being returned to the left ventricle by the pulmonary veins; from which it is partly directed again into the right auricle, through the foramen ovale, and partly passes into the left ventricle, from which it is sent into the aorta, and is thus distributed over the system. In this way the greater part of the mass of blood pursues, in the foetus, a very short course.

IX. This theory was favoured by a number of authors, who pretended, by dissection, to support his discovery; while it is controverted again by others of equal respectability, who deny the facts on which it is founded. Mr. WINSLOW, the celebrated anatomist, has endeavoured to reconcile this theory with the common opinion entertained, by observing, that, from the com-

munication between both auricles, the heart is to be considered as possessing but one auricle, forcing the blood into two distinct ventricles; that from the one ventricle it is sent into the pulmonary artery, while the *canalis arteriosus* prevents greater part of it from passing into the lungs; and from the other ventricle it is transmitted immediately into the aorta. But in this way, it may be remarked, the valve of the *foramen ovale* is rendered useless; and we cannot see any reason for the peculiar disposition of the *foetal* circulation if this takes place.

X. A later theory than this is one proposed in the *Petersburg transactions*, where, instead of the communication of the *foramen ovale* being admitted, it is, on the contrary, maintained that no connection prevails at all between the auricles. This theory is said to be likewise founded on anatomical observation, and is prefaced by the author, with observing, that as, after birth, the contraction of both auricles is simultaneous, or performed at once, so blood cannot possibly be received from the one into the other, or the contractions of them must be performed at different times. This, however, cannot be shown; and if it could, it is probable that, after continuing for the whole of the *foetal* state, it should remain for the whole of life. This theory is founded on an observation, that the *vena cava*, before going to the heart, divides into two branches; one of which enters at the right auricle, and the other passes into the left at the situation of the *foramen ovale*.

There is, indeed, a great deal in the reasoning employed by this author to support his theory; but farther observation is necessary to confirm it; and the merit of

his discovery as yet rests merely with himself. The old opinion, therefore, is still more generally followed, though it may be difficult to ascertain in what precise manner the vessels peculiar to the foetus are so easily contracted after birth; for, in the space of a very short time, we find almost no vestiges of the course of the former circulation to be traced.

State of Foetal Organs.

XI. From the foetal circulation, the peculiarity most dwelt on by authors, we examine next the state of its organs;—and the first to be noticed is that of the lungs.

The lungs of the foetus appear, on dissection, of a compressed form, more solid, and darker coloured, than after birth. This proceeds from the small quantity of blood, which, from the course of the foetal circulation, necessarily enters their substance; and from this circumstance of their increased solidity, at this period, an attempt has been made to ascertain, by experiment, in cases of still-birth, whether the child has once respired. As an opinion is frequently required on this subject, and the fate of the mother determined by it, it is necessary that it should be made with the strictest accuracy, and those several accidental circumstances marked which may influence its issue.

This experiment consists in cutting out a portion of the lungs, and throwing it into water; for before respiration, as they contain no quantity of air to render them specifically lighter, but are equally solid with any other part of the body, it will naturally sink, while, if respiration has once commenced, and that for a period however short, the reverse will take place. But in those cases, where, after death, the child has been retained in

the uterus for some time, and a degree of putrefaction has been induced, although there has been no inflation of the lungs, yet, on immersing them, they will continue on the surface of the fluid, from a quantity of air, the effect of putridity, generated in their substance. But, in this case, several other parts of the body, which are naturally denser than water, will be found, from the same cause, to undergo the same change; and therefore several parts of the body should always be tried, to prevent any fallacy in the experiment. Another circumstance too, that may influence its issue, is the particular part of the lungs from which the portion is taken for the experiment. Thus, if a child, though dead born, is laid on its face, the upper part of the lungs will frequently come to be inflated, though it has never properly breathed; and if any of this upper part is taken, it will swim, thereby leaving us to form an opinion different from what is really just. Besides, children, we know, frequently die at birth, after two or three inspirations, either from the difficulty of the previous labour, or a morbid state of the system. Hence, from this experiment, no conclusive opinion can be properly drawn. The situation of the mother, and other circumstances, must determine her fate; for the accoucheur, after performing the experiment with the greatest accuracy, on account of the fallacy which may take place, can only hint suspicion, but offer no decided opinion.

XII. In the adult, the action of the lungs is found of great importance to the brain, and they possess a certain alternate motion with each other. This would seem necessary to preserve an active state of the vital power; for, in the foetus, when this motion does not take place, we have reason to believe that a general insensibility, or

what may be termed incomplete life, prevails; and of this we have proofs in the very great pressure which the brain is then capable of bearing.

XIII. The next organ to be remarked, from its contiguous situation, is the thymus, a glandular body peculiar to the foetus, and placed over the great vessels which are sent from the heart. This body, in the foetus, is very large; it remains after birth, but gradually decreases; and in the adult its former situation cannot be detected: its uses we are unacquainted with. Many conjectures, indeed, have been formed on them; but these appear far from impressing any conviction of its real nature. Mr. HEWSON has considered it as an appendage of the lymphatic system, and that it bears a chief part in the formation of the red globules of the blood; but blood, we find, appears in the placenta while the foetus is yet in a pellucid state; and this blood, therefore, being carried to the foetus in a perfect state, does not require any organ like this to render it more complete. The chief circumstance of difficulty, with regard to this gland, is to account for its decrease. In the foetus it seems evidently supplied by several vessels.—We cannot, after birth, perceive any mechanical cause to operate in effecting its diminution: we can only therefore conclude, that its decrease must be owing to an obstruction of its circulation, preventing the transmission of fluids to it in the former quantity. The manner, however, in which this happens, we are not acquainted with.

XIV. The next organ in order, deserving notice, is the liver. Its size exceeds greatly its proportion with

the other organs of the foetus, so as to fill both hypochondria; and its colour is also considerably paler: but the cause of this we cannot pretend to ascertain.

XV. The kidneys also, in the foetal state, differ something in their structure. They are divided into distinct lobuli, similar to those of the quadruped; but this division soon departs after birth: and the use of such a peculiar structure we cannot determine, further than as it may lessen the quantity of secretion, which is at this period unnecessary.

XVI. The next peculiarities are found in the genital organs.

Thus the bladder of the foetus is more oblong than it is in the adult; and from the upper part there seems to proceed a particular duct, called the urachus, though it is here different from what is observed in the quadruped; for there it is a real duct, connected with a particular membrane, named the alantois, the cavity of which serves for the reception of the urine of the foetus: but, in the human foetus, it forms merely a suspensory ligament; and, by pressing the bladder, you are not able to force into it a single drop of urine. Many authors, however, pretend that it is a real canal, and that they have been able to fill it by injection; though this is a point that admits still of considerable doubt.

XVII. In the male, during its continuance in the uterus, the testicles are found contained within the abdomen; and it is not until birth, and even some time after, that they gain their proper situation. They seem originally situated near the kidneys, and gradually de-

scend as gestation advances. The cause of their original situation we cannot easily explain: it has afforded much conjecture to most physiologists, and the explanation of it remains still mysterious. From this circumstance of their descent, which is at the ring of the obliquus descendens muscle, when pressure is applied, either from delivery or accidentally, some short time after birth, before a proper adhesion of the sides of the ring takes place, some portion of intestine is pushed through this part, forming hernia; and from the period at which it happens, it receives the particular appellation of congenita. To know this disease,—when a fullness appears at this part, it is necessary to ascertain whether both testicles are already in the scrotum: if they are, we are certain it is owing to the former cause. But, in many instances, it has been observed that one testicle is longer in descending than the other; nay, that it has not happened until after the age of puberty, and has even never taken place: and in Mr. POTT's treatise there are several examples of the former, where the true descent of the testicle itself, at a late period, was mistaken for hernia.

With respect to the treatment of hernia congenita, little is necessary, for at this early period it soon disappears, and the intestine is retracted within the abdomen. All mechanical assistance therefore, by bandaging, is improper. The disease should be left to time, and the part merely supported by the hand, when any increased pressure takes place, from crying, or any other cause.

XVIII. Analogous to this original situation of the testicles in the male, may be mentioned a peculiarity of the female, particularly conspicuous at this time; viz. the

hymen. It consists of a small membranous expansion, in the form of a crescent, shutting up the entrance of the vagina. This membrane has been denied by many authors as ever existing. The late Dr. HUNTER used to observe that he never saw it wanting in a female foetus; that it is the inaccuracy of the observer that prevents its detection. Its delicacy exposes it at all times to accidental rupture; and we have very few instances of its remaining entire until the age of puberty: hence it can be no proper test of virginity, as was formerly imagined. In some rare instances, when it has remained entire at the age of puberty, morbid symptoms have occurred from this cause; for the menstrual discharge being retained, comes to be collected in a quantity, that at last sensibly enlarges the uterus similar to pregnancy. From external symptoms, it has been generally supposed, therefore, owing to pregnancy; and its symptoms consisting in down-bearing pains, suppression of urine, &c. very much resemble those of abortion. It is only then to be detected by examination, when it is found commonly of a firm membranous texture. The symptoms of this complaint proceed gradually. The pains are felt, at first, only at each successive return of the menstrual period, when they go off, as the action of the uterus, necessary to this discharge, ceases. But their continuance, in a short time, comes to be longer at each period, as the organ increases by distension, and at last they are constantly felt, occasioning the most uneasy painful state. The removal of this disease is very simple: it consists merely in dividing the membrane, by plunging an abscess lancet into its middle, which is to be carried for such a length and depth as to allow a sufficient opening for the discharge. This generally consists of a dark

thick blood, resembling in its appearance melted pitch. It possesses no fætor or other symptom of putrescency, in consequence of its seclusion from the external air; and in such cases it has been discharged, even to the quantity of some pounds. The incision should be healed over a piece of sponge, and care taken to prevent a re-union of the parts, by keeping them divided, and that no excoriation may arise from the remains of the evacuation acquiring an acrimony in its discharge. For this purpose frequent injections should be thrown into the vagina.

XIX. But, in some rare instances, it is not merely a membranous expansion which is the cause of the obstruction; the vagina itself seems filled with a solid fleshy substance. The operation is here uncertain in its issue, and requires often a trocar to be passed for a considerable way up; of which a singular instance is related in the second volume of the Medical Commentaries, where no less than four or five quarts of retained fluid was discharged, which had been collecting for a period of seven years.

XX. Along with these sexual peculiarities may be mentioned the state of the eye at birth. Vision we find not so distinct then as afterwards. The pupil does not suffer such a ready contraction, and the aqueous humour is rather in too great quantity, so as to render the form of the eye more convex. There is, even before birth, a peculiar membrane observable running across the eye, which hides the pupil, and has a number of vessels conspicuous in it. This membrane, from its effect, is named the *membrana pupillaris*. It is described by HALLER and other authors; but those fœtus in whom it is ob-

servable had not arrived at the term of gestation. It is not discoverable after birth, so that its use we are ignorant of.

The ear, we find likewise, as well as the eye, imperfect at birth.

XXI. The breasts of children of both sexes, immediately after birth, it is remarkable, are found somewhat turgid, and contain a whitish or milky fluid. The cause of this we cannot explain. It generally departs, when left to itself, in a few days, and it seldom occasions much uneasiness: nor should any thing be done, as is too commonly the case, to remove the fluid by pressure.

XXII. Thus we have considered the first division of the foetal peculiarities, or those which are intended to adapt it to its situation during its uterine state. In addition to these, it may be remarked that the nervous system of the foetus is larger in a proportion exceeding what afterwards takes place; that the vessels possess the same over-proportion, which is, indeed, necessary for the facility of growth: hence, in children, the difficulty experienced in stopping hæmorrhage, after the simple application of a leech.

XXIII. We come next to consider the second division of the foetal peculiarities, or those which are necessary to its safety in delivery. These consist in the connection of the more solid parts, and in the situation of several of the organs.

Connection of the Foetal Solids.

XXIV. The first is displayed in the connections of the bones of the head: this is more necessary, as it forms

commonly the presenting part, and as, by its pressure, the passage is opened for the expulsion of the rest. While then, in the adult, it consists of six different bones, connected by futures or mutual indentations; instead of the latter, in the foetus, its bones are not fully elongated, and therefore united merely by different membranous expansions, the breadth of which is easily contracted by compression. The chief of these expansions connecting the parietal bones is the fontanelle or bregma. At the end of two years, this part, in a healthy child, is nearly ossified. In delivery, where felt, it is easily distinguished by the pulsation of the frontal sinus; and it thus directs to a knowledge of the state of presentation where it is doubtful.

XXV. This mode of connection, which is so remarkably displayed in the cranium, we find also extended to the other bones. They are of a soft flexible nature, and loosely connected at their several articulations: hence, even where a good deal of force is exerted to bring down some of the extremities in præternatural labours, it is very rare that any accidents of fracture or dislocation happen. As the head is intended to precede the other parts in delivery, the latter seem on this account somewhat contracted in their natural size: thus the chest is smaller than usual in the foetus; the pelvis too does not possess the common proportions it afterwards bears. With the same intention to avoid any injury happening to the organs during delivery, we find them all placed higher than afterwards; so that they may receive, in some measure, protection from the thorax: hence it is very rare, that when the head passes, the other parts of the body do not readily follow; and it is from this cause of the organs being all placed higher in the foetal state that

a præternatural situation of them is at times met with; for we cannot well trace it to any other cause.

Situation of the Fœtal Organs.

XXVI. The particular situation of the fœtal organs has been very accurately described by M. PORTAL of Paris, who, in a memoir to the Royal Academy of Sciences, has drawn a comparison between their situation at this period and in more advanced life. From this memoir can be easily accounted for the frequent mistakes of physicians with regard to the seat of disease in childhood. Thus the stomach, in infants, instead of being placed transversely, as is the case in adults, hangs almost perpendicularly. By this means the situation of several parts of the intestines is different from what happens afterwards: the bladder of urine, in particular, is also much higher than in advanced life, being situated above the os pubis, and deserves attention, for this reason; that when lithotomy, which is often the case in childhood, is unavoidable, the high operation should, perhaps, be preferred, as the bladder will be more easily reached.

The situation also of the genital organs, in the female, at this period, differs somewhat from what takes place afterwards.

Changes at Birth.

XXVII. These are the chief peculiarities of the fœtal system, which fit it for its previous state of existence; on birth, however, a considerable alteration takes place; and that alteration depends on,

1. The change of its atmosphere.
2. The change of its circulation; and,
3. The change of its nourishment.

1. Of Atmosphere.

XXVIII. The change of the foetal atmosphere, at birth, may be considered as from 90, or 100, to that of our temperature frequently in winter under the freezing point; this change, therefore, cannot fail to be severe on the constitution of the child: it is also sudden in its application, and instantly affects the lungs or internal parts; hence the uneasiness it creates induces the child to cry and to betray every mark of pain and distress. The application of heat, therefore, at this period, is highly proper, and deferring the necessary changes of dress, &c. is a necessary step of precaution, till it is habituated somewhat to its new state. Whether, at this period, the constitution of the child has a greater power of generating heat, to avoid the consequences of this sudden change of situation, has not been determined; nature, however, it is probable, has in this respect made some provision, not yet ascertained, since we find children bear this sudden alteration of temperature so well. On our part, every attempt should be made to render the transition as small as possible. The child should be kept warm the moment it is received from the parent; the dress should be loose, warm, and easily adjusted: preparatory to this, the first washing should be with lukewarm water; nor should the exposure be long, nor any rough attempts made to separate the mucus from the skin at once: it is a covering intended by nature to be only gradually removed; and when too rapidly done, both an unnecessary exposure of the child, as well as excoriation from the attempts, is liable to ensue.

2. Of Circulation.

XXIX. The change of its circulation must be equally severe on the child as the change of its atmosphere. The

blood, which passed formerly in some degree independent of the lungs, and through which only one fourth part of their natural circulation was transmitted, rushes suddenly into them, and the coats of these vessels become, of course, distended in a violent degree. That this change is attended with some difficulty, we know, because, in many instances, the system of the child is unable to accomplish it, and the foetal vessels remaining in part open produces a state of the circulation which proves fatal. Besides the lungs, the circulation to the lower extremities is also increased, and a new accession of blood passes through the iliacs, which alters the proportion of the internal and external arteries of that name. Until these changes in the circulation fully take place, as marked by the stopping of the pulsation in the umbilical cord, no separation betwixt the mother and child should be made. This change occasions also the fluids of the foetus, independent of the order of circulation, to acquire new properties, which they either did not previously possess, or but in a very small degree; and the acquisition of these properties must naturally give them more activity in pervading its vessels, and farther to undergo the changes which secretion and excretion produce on them. Their acquiring these properties, however, must add to the uneasiness which the alteration of the foetal circulation necessarily creates to the child.

3. *Of Nourishment.*

XXX. The nourishment of the child is a change equally important with the other two. In the foetal state it is nourished by a fluid previously prepared, and already animalised; after birth, it is presented with a fluid only in part animalised, but easily converted or assimilated

into this state. This nourishment appears, as we have seen, so early as twenty-four hours after delivery; and this period is the time pointed out by nature for the application of the child. Its efforts, at first weak, to elicit it from the organ, are gradually increased, till it flows in a full stream; a necessary relief, as formerly observed, to the state of the mother as well as the child. This nourishment differs somewhat in its specific nature, or is peculiar to the particular classes of animals for which it is designed; hence the variety observable in the proportion of the principles which the milk of different animals exhibits. This nourishment does not, as during the foetal state, pass directly into its circulation; it is received into organs formerly in a collapsed or inactive situation: these it distends; and by them, from their increased vitality or power of action, the consequence of birth, it is fitted for entering the circulation in a complete animalised or nourishing state.

XXXI. The appropriate circumstances then necessary in this fluid, for the purposes of nourishment, are,

1. That it should be suited to the particular class of animals for which it is designed.
2. That when received, it be in a healthy or proper assimilatory state; and,
3. That it be supplied in quantity sufficient to nourish the animal receiving it.

Of Milk.

XXXII. The first circumstance leads to an investigation of the milk of different animals, so as to establish the peculiarities that distinguish it in the human subject.

In its external appearance, milk is a fluid of a beauti-

ful opaque white colour, nearly as limpid as water, and of a pleasant emulsive taste. This fluid, submitted to chemical examination, is found to consist of four different parts :

1. An oily or inflammable part, convertible into butter.
2. A coagulable part, convertible into cheese.
3. A saccharine matter, or sugar of milk, termed the saccharine acid ; and,
4. A proportion of common salt.

XXXIII. The proportion of nourishment derived from different kinds of milk appears clearly to depend on the quantity of their oily and saccharine parts ; and the proportion in which these prevail in the milks of different domestic animals, is in the following scale :

Women's milk discovers most of the oily and saccharine matter.

Cow's milk has nearly the same proportion of oily but less of saccharine matter.

Goat's milk, in its proportions, is much the same.

Asses' milk is nearly equal to women's in its saccharine matter, but deficient in its oily part.

Sheep's milk exceeds women's in its oily part, but falls short in its saccharine matter,

Mare's milk possesses little of the oily, but a great deal of the saccharine matter.

XXXIV. From this scale, the distinguishing quality of women's milk is an excess both of oily and saccharine parts, compared with the milk of other animals commonly in use ; hence it conveys a more perfect nourishment to the child than the milk of other animals can bestow.

XXXV. From this composition, then, milk may be properly considered as water; holding dissolved in it a saline matter, approaching in its nature to sugar, a very bland oil, and a coagulable fluid of the same nature with the coagulable part of the serum. By means of this the oil is mixed with the watery part, as it were, into an emulsion; and by mixing similar ingredients artificially together, a very exact imitation of milk may be made. It is from the coagulable matter it derives its disposition to curd by acids and heat. From the saccharine or saline matter it is disposed to acescency; and, in some kinds of milk, this saline matter being more purely saccharine than in others, can be made to undergo the vinous fermentation.

XXXVI. The comparison of milk with the yolk of an egg is sanctioned by the similarity of their nature. To the chick the yolk performs the same office as the milk to the child: it possesses a communication with the stomach of the chicken by means of the bag in which it is lodged, and supplies the animal with nourishment after it is hatched. On being diluted with water, it forms a fluid not unlike the milk, and can, on many occasions, be substituted for it. It contains a less quantity of saccharine matter, which can be supplied by a small addition of sugar; and from its large proportion of coagulable matter, it can be employed to promote the union of more oil than what it contains with water: its proportion, however, of oily matter, is so great, that a considerable quantity can be procured from it by expression.

XXXVII. From these circumstances then, in the

variety of the milk of different animals, it is clear that every animal must be best nourished by the milk of that species to which it belongs: any succedaneum, therefore, for this, is incomplete; and where it is necessary to have recourse to it, an imitation of the proper proportion of the principles of the milk peculiar to that species of animals should always be made.

XXXVIII. We have thus considered the first circumstance to be attended to in the nourishment of the child: the next, or that the fluid, whose general principles have been thus ascertained, be in a healthy state, is a point equally important.

In its natural state, human milk possesses, we have seen, little of the caseous part; of course, that a less proportion of it is liable to coagulation than that of other animals. The agents of coagulation we know to be heat and acids. In this process of digestion the separation of its coagulable part must, therefore, in a certain degree, take place, from the temperature in which it is placed, and the action of the gastric fluid, which possesses a little acidity. In many cases, it would seem that the proportion of the caseous part is greater than it should be; and that, in consequence, from the greater separation of coagulum, digestion is in some degree suspended, and the fluid is unfit for answering the purposes designed: in other cases, the gastric fluid, though in health slightly acid, acquires, in consequence of fever, or the weakened powers of stomach, a morbid acidity, which it communicates to the milk, and renders it unfit for the purposes of nourishment; hence, wherever milk seems to disagree, and the nourishment of the child to be incomplete, an examination should take place,

whether it depends on a faulty secretion in the fluid drawn from the mother, or in an impaired state of the organ receiving it. The first may be judged of by an examination of the milk, and submitting to chemical investigation the proportion of the principles contained in it, which may be corrected, where deficient, by the regulation of the diet of the nurse; the second, when ascertained, which is chiefly by the four evacuations, may be obviated by the use of alkalies and absorbents in a proper quantity.

XXXIX. The third circumstance necessary is the quantity in which the supply of fluid is requisite for the child. This must be regulated particularly by the constitution and digestive powers themselves. Thus, as in adults, though the quantity of nourishment requisite for one child is much less than for another, in the choice of a nurse an abundant supply is the point always to be aimed at: her general health, therefore, the particular appearance of the breast itself, and the age of the milk, as insuring this supply, are essential circumstances to be considered, when the mother does not nurse, in the preference of a substitute.

XL. In this manner does nature proceed in supplying nourishment to the child. It first supplies it, as we have seen, by the powers of the mother alone; it is next drawn from the same source in a less perfect state, in order to be completed by the organs of the child, which are now fit for this office; and as the progress of the child advances, and its organs are stronger, an additional supply becomes necessary from another source, to aid this more simple nourishment, which the mother has hitherto bestowed. The particular time when this

addition is required, and the nature or quality of this addition, are subjects which have much divided the sentiments of physicians, and require, therefore, attention.

Of Additional Food.

XLI. Judging from what nature points out, such supply we should consider as unnecessary until the teeth begin to appear, or such instruments as are capable of preparing a different aliment. That this is the intention of nature there can be no doubt. Civilised life, however, has rejected the intimation, and this addition is begun at a much earlier period. Generally at the end of the first month, according to the best directions, a little boiled bread is added to the natural nourishment; and in doing this the bread should be deprived as much as possible, by previous boiling in water, of its ascescent quality. At first this addition should be sparingly made, and only given once a day. No animal food, even in the lightest form, should be allowed, until the child is able to walk.

When a proper number of teeth appear, the child is then capable of supporting itself on another aliment than this first supply from the mother; and it is, therefore, proper to withdraw it. The exact period, however, of this, or weaning, must be regulated by circumstances of the child's constitution and progress.

The first, or natural nourishment, continues generally in abundant supply for a twelvemonth; and no appearances, commonly on the part of the mother, by a return of menstruation, indicate that it should be sooner laid aside. Before this, the supply of additional aliment should be increased to the child, and its nou-

nourishment made as independent as possible of the fluid it is soon to want. When withdrawn, a somewhat similar nourishment should be still continued, and the organs of the child not injured at first by a diet of difficult assimilation.

Weaning.

XLII. But even with the best management, the withdrawing the natural food, so long its accustomed sustenance, or weaning, is attended with some slight derangement of the system of the child. This is more apt to happen, as fashion has now introduced its being withdrawn at a very early period, viz. in the 6th, 8th, or 10th month; and even some have given the length of doing it at 3 or 4. Nature, however, should here be our guide, and extremes avoided. Before weaning takes place, the attention should be directed to the child's taking of food, and the state of his bowels. Whenever he is capable of the former, and no irregularity prevails in the latter, it may be safely done; and that by putting something disagreeable on the nipple, as foot or aloes. If, in the course of it, diarrhœa ensue, it is to be treated as directed under the head of this particular disease, viz. diarrhœa and gripes; and particular regard paid to the choice of the particular food which seems to agree best with the child.

XLIII. This is the usual progress where regular nursing takes place, or when the mother herself, or a substitute, gives the natural fluid appointed for the nourishment of the child; but when circumstances do not admit this supply coming from the human subject, and

children are reared by the hand, a close imitation of this plan is still requisite in order to its proving successful.

Bringing up by the Hand.

XLIV. This imitation consists in rendering the fluid received from other animals as nearly in the portion of its parts the same as human milk.

To render it also more animalised, and deprive it of ascescency, a small mixture of a light jelly should be added; and to increase its saccharine part, the characteristic of human milk, some sugar may also be put to it. It should be given in a luke-warm state, or in the natural temperature as received from the animal: and it is further improved by previous boiling, so as to lessen its laxative tendency. The proportion of these additional ingredients, to fit it for the nourishment of the child must depend on the milk of the particular animal employed. Cows' milk is generally used, and it requires the greatest proportion of them; but, in weakly state of body, asses' milk should be preferred.

XLV. Various instruments have been made use of to administer this supply: the forms of these may be seen by consulting the different authors who have written on this subject. The easiest mode of application should be preferred, and the pot is therefore most generally employed.

XLVI. By this artificial mode of rearing children the same degree of nourishment is not exactly conveyed as by the human milk: an additional supply of other aliment, therefore, becomes sooner necessary, and the

organs of the child, accustomed sooner to exert their powers in preparing this artificial nourishment, are sooner able to receive that of a different kind. This addition should consist of light animal soups. This change may be begun at four or five months, and the soup should be joined with a mixture of bread, once a day; and it may be also alternated with bread and milk. When further advanced, light solids, in the form of pudding, may be next permitted; and, when teeth are once acquired, animal food may be given in a solid form, though in a sparing manner.

Sleep and Watching.

XLVII. In this way is the child to be reared to the period of weaning; but, besides its nourishment, other circumstances are to be attended to in conducting it to this period. These are with respect to its sleep, and watching.

The child at birth, in coming from the passive foetal state, has a natural tendency to doze or sleep much: this, perhaps, should rather be favoured, being the effect of the important changes which take place in its situation when ushered into the world. All children, therefore, in health, sleep much during the first four days, or even longer, unless prevented by disease. In the foetal state, children are suspended in a fluid, or kept in a certain buoyancy or motion: this points out, that, while awake, they should be kept much in motion, or exercised in the arms of an attendant; and also, while in sleep, that the same motion should be imitated by the use of a cradle. The propriety of this active state is pointed out by the nature of the infantine constitution, which, from the minuteness of its vessels, and their strong tendency to

accumulation along with the excess of fluids always abounding in their system, requires every aid of exercise to dissipate their superfluous parts.

XLVIII. We have thus considered the general principles to be adopted in conducting the management of children, during the period of nursing, or the first twelvemonth of their existence. Though by this management, strictly observed, many diseases may be prevented, yet as these, under certain circumstances, will unavoidably rise, it is next proper we should investigate the various diseases to which infancy and childhood are subjected.

DIVISION II.

Diseases of Infancy.

XLIX. The diseases of children admit different arrangements. The most useful in practice is that which considers,

1. Those disorders which are the immediate consequence of birth; and,
2. Those that arise from constitutional or accidental causes.

To the first division belong all the affections within the month, and likewise all the congenite diseases.

To the second the various maladies of a constitutional and specific nature.

L. The causes of infantine disease may be referred to three heads:

1. Constitutional laxity and irritability.
2. Improper diet; and,
3. Want of exercise.

LI. The first of these is the natural foundation of the future growth, and of the necessary changes that are afterwards to ensue; it is therefore to be considered only as a cause of disease, when, by deviation from nature in the rearing of the child, it is attended with morbid effects. The morbid effects of this cause are chiefly to be prevented by the use of the cold bath. It should be begun with to every child by the time it is three months old; and continued every morning from that period, except in case of disease, until it is four or five. In doing it, one dip is sufficient; and proper friction should be employed afterwards, until the natural glow is restored.

LII. Improper food is one of the most frequent causes of infantine disease; and as all faults of digestion in children consist either in the production of a tenacious slime or morbid acidity, the means pointed out are evident when affections arise from this cause.

LIII. Want of exercise in civilised life is the frequent source of disease in infancy. The young of all animals take much exercise; and nature points out the desire for it, in order that a regular secretion and excretion may at this period proceed for a proper and uniform growth. Every part also acquires strength and vigour in proportion to the exercise it receives: when exercise, therefore, is neglected at this time, glandular affections must naturally ensue, the foundation of which is laid in that very state of constitution essential to growth.

LIV. From these three causes, then, viz. from the natural infantine habit itself, from improper diet, and from want of exercise, we consider all the diseases to which childhood is subjected as arising.

From the first, they are disposed to all the acute diseases, particularly those of a specific nature; and from the two last, combined with it, to all the affections of the primæ viæ, of the skin, and of the glands, which are so frequent at this period.

LV. The diseases of children are often difficult to distinguish. The pulse affords no proper criterion; for its quickness precludes examination. Their temperature also affords only an uncertain information. Their general health is to be judged of chiefly from the state of the fontanels and skin.

If the former are too loose and separated, they mark disease.

If the latter is relaxed, particularly the skin of the scrotum, and not corrugated, there is then a morbid state of habit existing.

Incomplete Animation.

LVI. The first affection to be noticed at birth is what may be termed incomplete animation, and is either general or partial.

The first comprehends two species, varying in degree, viz. fainting, or syncope, and still birth.

Fainting.

LVII. Fainting is a very rare occurrence, but has been known to take place. A feeble pulsation of the heart is still felt during the fit.

The treatment consists in the use of volatiles, the same as in the adult: thus a few drops of volatile tincture of valerian may be given every two hours till recovery takes place.

Still-Birth.

LVIII. Still-birth is a more frequent occurrence. The animation is here so small as hardly to betray any appearance of it: we are not, however, from these small appearances, to suppose it entirely extinct. Under these circumstances, most unexpected recoveries have taken place; and the supposition of the total extinction of life will often prevent the proper means being employed, or at least persevered in. In a former volume, we described all the symptoms of the extinction of life previous to birth; and pointed out their uncertainty. In the same way, after birth, unless actual appearances of putrescency prevail, no symptom can be depended on but the real experience of the inefficacy of the means employed for restoration after a reasonable time; for in the child, at birth, the vital principle is particularly apt to be suspended from its natural imperfect animation; and where only paleness of the body, lividity, coldness, and want of respiration, are the prevailing symptoms, every effort should be employed to render its animation complete.

LIX. The propriety, however, of immediately inflating the lungs, has been called in question, and with seeming justice, by some authors, till animation is somewhat restored.

The foetal life, it is clear, does not require for its continuance the process of respiration, but a freedom of circulation through the organs already in use: the restoring, therefore, the circulation, by the means already pointed out, seems the primary indication; and the proofs of its restoration will appear by the bleeding of the cord, and the glow of colour on the lips and countenance. When this is once obtained, inflation of the lungs may then be attempted, to render the animation complete.

LX. A frequent cause of still birth, alleged by some authors, is the filling up the fauces and trachea with the liquor amnii or mucus previous to birth.

This collection of the liquor amnii is generally removed by the action of labour; but when this does not completely take place, it may prove an impediment to the exercise of the functions at birth; and its existence, therefore, is always to be had in view before other means are employed.

LXI. The different means employed to recover this state are; first, warmth, as covering the child with warm cloths, and using the warm bath; and, secondly, exciting the action of some of the principal organs, particularly the lungs, primæ viæ, and umbilical circulation.

The first is performed by blowing forcibly into the trachea or windpipe, and then expelling it again from the lungs, by pressure against the diaphragm and breast; stimulating the nose and throat with a feather, &c.

The second consists in the use of warm glysters into the rectum, particularly of tobacco-smoke.

The third depends on immersing the placenta in warm water, and forcing the blood through it into the circulation of the child.

In addition to these means, friction of the surface with stimulants is to be joined, also forcibly striking the soles and nates.

LXII. The partial species of this disease, or of incomplete animation, consists in a discolouration of the face and extremities, often of the whole surface. This discolouration is either the effect of pressure in delivery, or, without this, of mal-conformation, and an interruption taking place in some parts of the circulation. The parts

in this case are first black, then change to a leaden colour. At times this appearance is very partial; at other times it is more general. In some cases it is temporary; in others recurrent.

LXIII. Our prognosis is determined by its appearance as a temporary affection; and, if recurring, by its not showing the same deepness of tinge as at first; for, where this last prevails, it is generally fatal.

LXIV. The treatment lies in promoting a freedom of circulation to the skin by heat, and exciting the action of the primæ viæ.

The first is done by gently chaffing the affected parts before the fire.

The second by the exhibition of a glyster, or the exciting vomiting.

Where very partial, the application of a leech may remove the accumulation.

Red-Gum (Strophulus Intertinctus).

LXV. The red-gum is an efflorescence of spots, varying in their size and appearance, confined to the superior parts of the body, particularly the face, cheeks, and neck, fore arms, and back of the hands; but frequently extending also in its progress over the whole skin. They are generally, though not always, preceded by some disorder of the system. They are commonly also attended with costiveness.

LXVI. The varieties of their appearance are either small spots, pustules filled with a limpid or straw-co-

loured serum, which dries, turns horny, and scales off; or it shows itself in small points, like pin-heads, of a pearly colour, and opake.

LXVII. The duration of this affection is uncertain. It continues often permanent for a considerable time; or, if transitory, is succeeded by repeated appearances of the same kind, the successions of which vary in the exact period of their intervals.

LXVIII. A species of this disease, termed the white-gum, deserves to be noticed merely from the difference of its appearance; but, as forming nothing specific in its nature, nothing further occurs in its treatment.

LXIX. This disease is supposed merely the effect of the external air or friction of the clothes producing a strong determination to the skin. It appears indeed, in some children, coeval with birth; in others not till some days or weeks after. Thus it would appear rather the symptom of an internal acrimony affecting the surface of the primæ viæ, and from the sympathy between the two surfaces thrown out on the skin.

Hence the two diseases of gum and aphthæ appear to alternate with each other.

LXX. For the cure of this disease, two indications present themselves:

1. The treatment of the external surface itself; and,
2. The removal of the internal acrimony, for the most part connected with it.

The first depends on a proper application of heat, so as to prevent the sudden disappearance of the disease,

or its being thrown in upon the internal parts; the 2d on the use of absorbents and laxatives.

Where any uneasy symptoms of sickness or depression arise before this removal takes place, gentle cordials, the use of the fœmicupium, and attention to the temperature of the atmosphere, will be effectual in overcoming it.

Retained Meconium.

LXXI. An accumulation of the meconium, or bile, in a highly animalised state, precedes birth; and, when not discharged after it, is productive of various complaints, as indigestion, flatulence, pain, &c. often ascribed to a different cause.

LXXII. The seat of this matter is the larger intestines, and the other parts of them are almost entirely free of it; it is therefore from its action here, or its being found in one part, it is more apt to produce such morbid symptoms than if it were more diffused.

LXXIII. Its discharge, therefore, takes place as a natural process during the first days after birth, from the increased sensibility of the intestines acquired by the changes then arising, and perhaps also from the admixture of this matter with atmospheric air then admitted to it, which mixture alters its former animalised state. Where such change, however, either on the parts containing it or the secretion itself, does not ensue, from its being retained, it becomes the object of medicine to relieve it.

LXXIV. This is done by the use of laxatives, of which a proper selection is necessary.

The most natural laxative is the milk, which at first is allowed to possess this quality; but where the milk is ineffectual for this purpose, then syrup of roses or of buckthorn, given, diluted in gruel, by tea-spoonfuls, will answer the purpose; or a little honey in whey; or a slight infusion of rhubarb; or a few drops of antimonial wine, much diluted.

LXXV. Though these means are generally sufficient, yet, in many instances, more powerful ones require to be had recourse to; but, previous to it, the use of injections should be tried, and the removal of part of the meconium in this way will often give an action to the bowels, which occasions the rest to be soon discharged. Should these attempts fail, from some peculiar torpor of habit, then senna, jalap, or calomel, or some of the more powerful or drastic medicines, will then be unavoidable; though much observation and caution are necessary to direct their proper dose.

LXXVI. As the cause of children's complaints are, at this period, often mistaken, to know whether arising from the present source, particular attention should be paid to the state of the discharge from the time of birth; and unless a proper evacuation of the meconium has appeared, the morbid state is clearly the effect of retention.

Jaundice (Icterus Infantum).

LXXVII. The icterus infantum is distinguished by the same yellow colour of the skin as in the adult, though in infants the nails are remarked to be free from its tinge. In its progress, when continuing some

weeks, the yellow deepens, or changes to an orange colour.

LXXVIII. It is attended also with the same lethargic state as in the adult; but it is here particularly dangerous, from the child being unable to suck. It arises from viscid matter obstructing the mouths of the biliary ducts, seldom from the meconium; and this viscid matter therefore may be combined either with obstructed meconium or not.

LXXIX. This disease has been remarked as more frequent to the children of some countries than others. It is not apt to be received before birth; but it can be communicated from the mother to the child during the period of nursing.

LXXX. The cause of infantine jaundice is much the same as in the adult; but, by being of a milder nature, it requires a less complicated treatment.

An emetic may be given; and the ipecacuanha is here preferable, in a dose of three or four grains, as being more certain in its operation than the antimonials. The emetic may be succeeded by a laxative, and a few grains of rhubarb are the best form of it. The repetition of this plan every two or three days will be sufficient to effect a cure; but, if the disease should continue obstinate, saponaceous medicines may then be had recourse to.

Erysipelas (Erysipelas Infantilis).

LXXXI. The infantine erysipelas consists of blotches, various in their appearance, and rapid in their pro-

gress, acquiring soon a purplish or leaden hue, becoming exceedingly hard, and tending frequently to mortification.

LXXXII. Its attack is generally a few days after birth, seldom exceeding the month, though sometimes later; and at times its attack has been known to precede birth.

LXXXIII. The situations it occupies are various, as every part of the body is occasionally its seat; but its violence is always in proportion as it departs from the extremities, or affects the trunk and superior parts.

LXXXIV. In dissections of this disease, where fatal, a similar state of the intestines is discovered; and the external inflammation, therefore, is probably merely a consequence of the internal inflammation.

LXXXV. This disease is commonly very quickly fatal, and that in a few days. Various methods of treatment have been pursued; but the tonic plan, combined with an antiseptic local treatment, has been the most successful.

The best tonic is a decoction of the bark, with aromatics, given frequently,

To the parts, compresses, dipped in camphorated spirits, are the most successful application.

In spite of all, however, it is a disease frequently experienced fatal.

Ulcerous Nostril (Ozena Infantilis).

LXXXVI. The ozena of infancy is distinguished by a

discharge of matter from the nose, first purulent, and then sanious; a purple-streaked eye-lid towards its verge; a difficulty of breathing, particularly in sleep; and an external fullness of the throat and neck, discovering, on inspection internally, the tonsils tumified, of a dark red hue, with ash-coloured specks, frequently ulcerations.

LXXXVII. This disease appears with various degrees of violence, and is therefore differently described by authors. Its progress is generally rapid. Dissections afford little information on its nature; and the fatal termination, after some days' increasing debility, takes place either by the attack of convulsions, or the increasing debility itself preventing altogether sucking or swallowing.

LXXXVIII. From the apparent symptoms, the use of tonic and antiseptic medicines seems particularly indicated. The bark should be given in decoction or glyster, joined with cordials. The same remedies should be exhibited to the wet-nurse. The acrimony of the discharge on the adjacent surfaces of the nose and throat should be prevented by antiseptic washes, and by a favourable position of the child for its external discharge. Blisters are improper, as tending to produce gangrene of the part.

Aphthæ (Thrush).

LXXXIX. The thrush is an eruption of spots, appearing generally about the third week, or within the month, on the lips and inside of the mouth, which con-

tinues to spread, and at times affects the whole of the alimentary canal, appearing externally at the anus.

XC. This disease, from its appearance, is of three species; the white, the red, and the black.

XCI. The white or mild species is generally preceded by an inclination to dose or sleep. It appears spreading thinly over the lips and tongue, in the form of white curdy specks, which do not increase after two or three days. They then turn yellowish and brown, which is generally in seven or eight days, when they depart; after which, the same appearances are apt to be successively renewed.

XCII. The second species, or the malignant, is marked by spots of a darker colour, and are more extended than the former. It is also often combined with a species of erysipelas, and accompanied with some degree of fever, griping or sour green stools, &c.

XCIII. The third or black species is very uncommon, and may be considered as an aggravated species of the second.

XCIV. This disease is not properly attended with fever as a primary symptom; but it frequently supervenes in its progress, when the eruption is extensive, and symptomatic of some other affection. Along with the fever, there is also frequently griping or loose stools, of a watery or sour green colour.

XCV. The causes of this disease are evidently morbid

acidity or indigestion, when occurring as a primary disease, in which form it appears within the month, and then it may be considered as the effect of improper diet and confined situation.

XCVI. The prognosis to be formed in this disease depends on its particular species. The malignant species is very often fatal, and has been known to appear in many places of an epidemic nature.

XCVII. The treatment of this disease depends on correcting the secretions of the primæ viæ, and obviating the topical affection of the part.

The first is generally begun with an antimonial emetic, and a few drops of the antimonial wine is preferred for this purpose. Absorbents are then to be had recourse to; and as the scaling takes place, purgatives, as a few grains of rhubarb, will produce their discharge. By a regular repetition of this plan, the disease will be removed; and, to obviate its effects, bitters may be exhibited afterwards, as a few drops of chamomile, or gentian infusion, or tincture.

The second indication, the topical treatment of the part, is executed by the application of astringents in various forms: the chief of these are the borax and diluted mineral acids, united with an astringent. Thus: the borax and sugar, in the proportion of one to seven, is an useful powder: honey acidulated with elixir of vitriol, or muriatic acid, or united with borax in the proportion of ʒſs. or ʒi. to the ʒi.; or else the infusion of red rose-leaves acidulated with mineral acids, or mixed with honey.

XCVIII. When the thrush is of the worst or black species, an early exhibition of antiseptics will be proper; and the bark should be employed fully for this purpose.

Skin-bound.

XCIX. The disease termed skin-bound is a peculiar affection, displayed in a yellowish white colour of skin, its tightness or fixed state to the parts below, and its hard resisting feel, particularly on the face and extremities. To these symptoms are joined coldness of the child, its apparent pain, and death-like appearance.

C. This disease is uncertain in the period of its appearance, and shows itself either as an original affection, or as combined with a morbid state of the bowels. It is generally fatal on the third or fourth day from birth, and seldom protracted beyond the seventh.

CI. It is more frequent in some countries than others; and it has particularly claimed the attention of the French physicians, by whom it is regularly described.

CII. The causes of this disease are somewhat uncertain: but it has been referred to an endemic source, and therefore chiefly appears in hospitals. It is very frequently fatal, unless the timely application of means are had recourse to.

CIII. Dissections of this disease show constantly a serous extravasation of a deep yellow colour, an accu-

inflammation both in the liver and lungs, and affections of the lymphatic system, particularly the glands of the mesentery.

CIV. The treatment of this disease depends on the removal of the spasm, or contracted state of surface, and restoring at the same time the health of the bowels and intestines. This may be most readily effected by the use of the warm bath, and friction externally, also blisters; and internally by attention to the exhibition of carminative medicines, particularly the use of the volatile alkali, and antispasmodics, calomel, or other laxatives, if necessary, being first premised.

CV. The rigidity in this disease exists in various degrees: at times it affects the subjacent muscles as well as the cellular membrane: thus the lower jaw has been affected with tetanic symptoms. A variety of anomalous symptoms also at times take place; as the presence of infantine eruptions, ending in gangrene of certain parts, difficulty of swallowing, or with extreme pain, &c.

Convulsions (Convulsiones).

CVI. The convulsions of children are generally preceded by slight symptoms of distortion of the face, as involuntary laughter when asleep or awake, squinting of the eyes towards the nose, or turning them upwards, the child at the same time changing to a blueish colour.

CVII. The fit itself is distinguished by distortions more or less general, according to the violence of the attack. These distortions are either of the member in succession, or of the body all at once. They are attended with the usual symptoms of foam or frothy discharge from the mouth, and they are terminated by profound sleep, from which the child awakes unconscious of its former state.

CVIII. The repetition of these fits depends on the violence of the cause; and after two or three fits, on successive days, a longer interval often takes place.

CIX. This disease is always symptomatic; and the particular irritations producing it are, the meconium, teething, and worms.

CX. Its attack from the first cause is generally immediately after birth; and it appears under two forms of the lock-jaw, or Trismus Infantilis, and inward fits.

Lock-Jaw (Trismus Infantilis).

CXI. The Trismus Infantilis consists in various degrees of rigidity affecting the under jaw, sometimes the muscles of the face, producing a peculiar fixedness of feature; and at other times extending over the neck and the whole body, with various concomitant symptoms.

CXII. Its appearance is generally from the sixth to the ninth day; and it is peculiar to the children of some countries more than others.

CXIII. It depends on fixed spasm of these parts, and it may be considered as the same morbid state that affects the adult, only varied by the particular circumstances of infancy.

CXIV. From its more frequent appearance in some countries than others, it must depend on some special cause there existing; and this cause we must naturally refer to the action of the external atmosphere in these situations, under the circumstances of the extreme irritability which succeeds birth. As the retention of the meconium, alleged by authors, frequently occurs without the attack of this disease, it does not therefore form a special or appropriate cause; but the irritation of the external atmosphere, under particular combinations with which we are unacquainted, may be sufficient for this effect.

CXV. The prognosis to be formed of this disease is generally unfavourable, and the disease is also rapid in its issue: it is not, however, very prevalent in this country; in the warmer climates, the fatality from this affection is great.

CXVI. The treatment here, as in the adult, depends on removing irritation, and relaxing the spasm.

The first is executed by clearing out the intestines from the meconium, an active source of irritation at this time.

The second consists in the use of the warm bath, in friction with oils, anodynes, and stimulants, to the part; in the application of blisters near the seat of the disease; and in the use of cordial and tonic remedies in

ternally, as in the use of diluted spirits, wine, ol succini, &c.

Inward Fits.

CXVII. The symptoms which distinguish this second form of early convulsions, termed inward fits, are, a little blueness of the lips, slight turning up of the eyes, and a peculiar sound of voice, with quick intervals of breathing.

CXVIII. These symptoms are most severe in sleep, when they are often attended with an appearance of smiling, or else an expression of grief and pain. They are aggravated by sucking and feeding, or by whatever produces exertion or surprise; and they gradually increase in violence till the actual epileptic form is assumed.

CXIX. The causes of this disease are uncertain, though the state of bowels has been noticed.

CXX. The treatment consists in the use of an emetic, succeeded by volatile and foetid medicines; though this method is generally unsuccessful in their cure.

CXXI. These are the two forms of early convulsion: the last or proper form belongs to a more advanced period, to be afterwards considered.

Abdominal Complaints.

CXXII. The chief abdominal complaints that attend infancy are wind and costiveness: and these complaints

assume various symptoms, from simple griping pain and crying, drawing up the legs and scrotum to the height of actual spasm, and convulsions.

CXXIII. Such complaints are often hereditary, and may be traced in the mother; a mark to detect their origin in the child.

CXXIV. This state of the bowels, where apparently hereditary, must be counteracted by gentle means; and only where assuming a real violence of symptoms, is a strong use of laxatives to be had recourse to.

CXXV. In counteracting this morbid state, three circumstances come into review as present:

1. The slow state of the bowels themselves.
2. A tendency to the generation of wind; and,
3. A degree of morbid acidity combined with them.

CXXVI. In the choice of laxatives, therefore, to answer this view, absorbents and aromatics must be combined; and if the costiveness, the leading indication, is removed, the tendency to the other symptoms must be prevented by a further use of absorbents and aromatics, in a mild form.

CXXVII. When the morbid symptoms are so violent as to demand more immediate relief, a dry glyster, or suppository, made of Castile soap, mallow or beet root, is preferred; or else senna-tea, and some of the drastics.

CXXVIII. Where the wind creates much pain, the

application of external heat, either dry or by fomentation, will be useful as a temporary relief.

CXXIX. Much attention is also necessary to the food in counteracting these symptoms.

Watchfulness (Pervigilia).

CXXX. Watchfulness is, on many occasions, a species of disease in infants; and arises from two causes,—abdominal complaints, or improper regulation of the sleep through the day.

CXXXI. In the first case, the chief point is to ascertain the cause; when the remedies recommended under the last disease may be employed according to the particular state of the bowels then prevalent.

In the second, its prevailing only in the night will in part demonstrate the cause, and point out the remedy.

Vomiting (Vomitus).

CXXXII. Vomiting in children is seldom an idiopathic disease; it is generally a consequence of some other morbid state.

CXXXIII. In judging of this symptom, a difference is to be made between real vomiting, and what may be termed the simple unloading of the stomach.

CXXXIV. The latter is often the attendant of health and repletion. It takes place in a very few minutes after sucking, and so soon as the gastric fluid has begun to act upon the contents of the stomach. It is accompanied with no sickness, or apparent unhealthy state,

and flows merely that the quantity received is too great to allow the process of digestion to proceed, and the organ is therefore stimulated by it to unload itself of part, when its usual operations are resumed.

CXXXV. No particular treatment or interference is here proper; Nature herself removes the accumulation, and the effect ceases on the dispersion of the cause; though some time should elapse before allowing the organ to be again filled.

CXXXVI. Real vomiting, then, always supposes a state of disease or derangement; it is a very common complaint during the first and second week; and this derangement depends on several causes, as,

1. Predominant acidity.
2. Morbid irritability.
3. Suppressed cuticular eruption; or,
4. Interrupted discharge from some part.

CXXXVII. With respect to the first, it is often characterised by the smell of the matter thrown up, as well as the greenish or clayey colour of the stools.

CXXXVIII. In regard to the second, it is very apt to occur in very delicate puny children, or who are otherwise unhealthy.

CXXXIX. The sudden suppression of any eruption is always attended with an affection of stomach, often succeeded by general fever; and in the same way, when any discharge has prevailed, its disappearance is apt to be followed by the same symptoms.

CXL. In counteracting, then, this morbid state, the particular causes of it are to be had in view.

CXLI. In the first case, the use of absorbents and alkalis are particularly indicated, as the testaceous powders, magnesia, the aqua kali, or soap.

CXLII. Myrrh also has been found an useful remedy.

CXLIII. In the second, tonics and aromatics form the proper remedies; as an infusion of bark, or of chamomile, with the junction of ginger, orange-peel, or a little rhubarb; and occasionally an anodyne.

CXLIV. The same remedies also, in the form of external application to the region of the stomach, as an aromatic fomentation, or the emplastrum ladani, with the- raica, may be attempted.

CXLV. In all cases of vomiting, the existence of hernia should be investigated.

Inflammation of Stomach (Gastritis Infantum).

CXLVI. The gastritis infantum is a rare disease, and distinguished by great pain in the region of the stomach very frequent in its recurrence, and marked by violent contortions or writhings, and the application of the child's hand to the part.

CXLVII. When it occurs, it is generally in sum-

mer. During its continuance nothing is retained, but immediately rejected. It is not, however, so fatal in children as in adults.

CXLVIII. The treatment consists in the use of cooling and laxative remedies, as the castor oil, lettuce-juice, &c.; but, where symptoms are very violent, external fomentations, the warm bath, or a blister to the part, may be attempted.

Gripes (Tormina).

CXLIX. Gripes are always the attendant of wind, costiveness, or diarrhœa; and therefore entirely symptomatic. Their treatment cannot be disjoined from that of the primary affection with which they are connected. Alteration of posture, so as to keep the child upright, is frequently an alleviation of their violence.

Looseness (Diarrhœa).

CL. Diarrhœa is one of the most frequent complaints of infancy; and one which, unless severe, is hardly to be considered in children as a real morbid state. By it, nature, with them, most commonly throws off any offending cause. Its causes, therefore, and treatment, require very particular attention.

CLI. The general treatment of this complaint consists in first removing, as far as possible, the of-

fending matter, and then checking the particular symptoms.

CLII. The first of these is effected by the exhibition of an emetic, where the offending cause appears lodged in the stomach; and afterwards by the use of rhubarb and absorbents. The extent and continuance of this plan must depend on the obstinacy of the complaint. To these medicines opiates must be occasionally added, according as particularly indicated by pain and irritation. In fixing the dose of opiates with respect to children, some nicety is required; though, in general, they bear them proportionally better than adults.

CLIII. The particular nature of the diarrhoea is to be often drawn from the appearance of the stools, and the treatment to be regulated from that circumstance. Thus, when the stools are sour and curdled, and the symptom of hiccup occasionally attends, the propriety of absorbents, joined with aromatics, is strongly pointed out, as the magnesia, with a little nutmeg.

CLIV. When, again, the stools are slimy, and green or white, and of a clayey colour, alkalis may be added to the former plan, as the aqua kali, or a little dissolved soap, in clyster.

CLV. When the stools are watery and bloody, or at times foetid, the exhibition of a powerful purgative should precede the other treatment; and, if attended with much griping, cordials, and clysters of warm milk, may be also repeated.

CLVI. Besides this internal treatment, external applications are had recourse to as an auxiliary assistance. These consist of fomentations with brandy, with chamomile-flowers, white poppy-heads, &c.

CLVII. Two particular species of diarrhœa claim a special consideration: these are the *dentile*, and what are termed *watery gripes*.

CLVIII. The *dentile* species, or from teething, is frequently attended with pale stools, curdled and watery; and is most severe on cutting the double teeth. It is also accompanied with fever, which increases if the complaint is stopped.

CLIX. As it is here the effect of a general irritation of the system, not especially confined to the bowels, the indications pointed out are, to take off this general irritation by frequent purging, and more certainly where the parts are in a proper state, by the division of the protruding teeth, thus removing the primary cause. To this treatment, should symptoms of predominant acidity appear, a slight addition of alkalis, as the aqua kali, or sp. ammoniæ comp. may be joined.

CLX. Where no immediate protrusion, however, is expected, this treatment requires some limitation, and an intermediate use of cordials will be proper; but this must be regulated, as well as the degree of purging, by the state of the irritation, and the strength of the patient.

CLXI. The other species of diarrhœa, or the true

watery gripes, may be considered as a species of lientery. It is marked by thin watery stools, so frequent, that every thing taken immediately runs through the child, and often of a dark foetid colour. The period of its attack is various; often, in small delicate infants, within the month: at other times it succeeds some previous illness, and in other cases is merely accidental. The symptoms all increase in violence as it advances; and, from its rapid effects, it requires immediate attention.

CLXII. For the treatment of this disease, the evacuation of the primæ viæ is a previous and indispensable step: an emetic should therefore be given in divided doses, so as to have a full operation; and these doses repeated at a proper distance from each other, as ten minutes or a quarter of an hour. The emetic is to be succeeded by a warm laxative, as the rhubarb, with some aromatic. After the primæ viæ are thus cleared, the further removal of the complaint is to be trusted to small doses of ipecacuanha or antimony, combined with absorbents and aromatics.

CLXIII. Where the disease, however, resists this treatment, and a predominant acidity seems to attend, this is to be studiously corrected by large doses of absorbents and alkalies, as the aqua kali, tinct. of myrrh, or succinated sp. of ammonia, which may be even premised by a repetition of the emetic.

CLXIV. When this predominant acidity is corrected, if the diarrhœa still continue, opiates and astringents will be then proper, as the chalk julap, with laudanum and aromatics, or the logwood decoction.

CLXV. Besides this internal treatment, the application of aromatic plasters to the abdomen is common as an auxiliary remedy.

CLXVI. In the treatment of all abdominal complaints of children, much attention is necessary to the nature and kind of the food or nourishment taken.

CLXVII. The food of children, with this view, should be deprived of acid as much as possible: hence, instead of milk, animal food, in the form of thin beef-tea or mutton-broth, is preferable; and bread, deprived as much as possible of a tendency to ascendency by previous fermentation. The best kind for this purpose is the rusk and French roll, or flour baked in an oven till it breaks into a powder, and afterwards made up with boiled milk. Powder of arrow-root and tapioca may be likewise used in the same way. Indeed it is proper to alternate the food occasionally from one kind to another, and frequently to exhibit the animal food in a solid form, when the stomach rejects fluid nourishment.

CLXVIII. The change of the wet-nurse, also, makes often a necessary part of the treatment.

CLXIX. This morbid state of the bowels described is frequently attended with cutaneous eruptions. It is always a favourable symptom, and produces a relief of the most urgent symptoms.

Incontinence of Stools.

CLXX. A consequence of long-continued diarrhœa is frequently an incontinence, or want of retention of the alvine discharge. This complaint is temporary, and departs as strength is acquired. Cold affusion of the parts may be used as a temporary expedient.

Worms (Vermes).

CLXXI. From this affection no part of the body is excepted, as worms have been found in the heart itself: nor is any period of life confined to their generation, for they have been met with in the fœtus as well as in the most advanced age.

CLXXII. No disease is more frequent than this in early childhood, and its presence is not always decided by morbid symptoms; so that the actual passing of them is at times the sole indication of the disease. But, for the most part, morbid symptoms attend; and those enumerated as most commonly distinguishing them are what we have described in vol. I. p. 203, viz. pain and acid eructation of stomach, variable appetite, foul tongue, fœtid breath: the belly full, hard, and tense, with occasional gripings or pains in different parts of it, particularly about the navel; irregular state of the belly, heat and itchiness of the rectum, urine white and limpid, often discharged with difficulty.—With these symptoms are joined a dull appearance of the eye, often dilation of the pupil, itchiness of the nostrils, short dry cough,

flow fever, with evening exacerbations, and irregular pulse, grinding of the teeth in sleep, &c.

CLXXIII. The cause of worms we formerly noticed as uncertain; and their existence in every part of the body, and also before birth, shows that a disposition prevails in the human body to their generation, under certain circumstances; and this disposition prevails independent of the presence of any external cause favouring it.

CLXXIV. This disposition in the human body seems favoured by a certain laxity, or moisture, particularly of the primæ viæ. Hence the frequency of the disease in childhood.

CLXXV. The prognosis to be formed in case of worms depends much on their particular species, and also on their degree of irritation.

CLXXVI. The species of worms met with are of four different kinds: the teres or round worm, which generally occupies the higher parts of the intestines; the ascarides, or maw-worms, which occupy the lower; the cucurbitina, or short flat worm; and the tænia, or tape-worm. Of these the most dangerous is the tænia; but it is seldom met with in childhood.

CLXXVII. The morbid effects arising from the presence of worms depend on deprivation of nourishment, irritation of parts, lesion of substance.

CLXXVIII. For the cure of worms two indications arise;

1. To effect their expulsion; and,
2. To prevent their generation.

CLXXIX. Their expulsion is attempted in three different ways :

1. By simple evacuation or purging; and the remedies with this view are various, as fenna, scammony, and calomel : rhubarb, and calx of antimony ; Æthiop's mineral and calomel; valerian, and jalap; the different foetid or strong bitters, as rue, tanfy, &c.

2. By mechanically dislodging them from their seat by oils, as the olive and castor oil; by the amalgam of tin and quicksilver; by coweesh; by pewter-filings, &c.

3. By chemically destroying them, as by lime-water, by volatile alkaline salts, by decoction of quicksilver water, &c.

CLXXX. The future generation of worms is prevented by strengthening the tone of the bowels, and obviating the accumulation of mucus. This is done by the use of tonics, and the particular choice of diet.

CLXXXI. The tonics most employed are those of the astringent kind, particularly the steel, in the form of the rust, or as a chalybeate water, joined with some bitters.

CLXXXII. External applications have also been had recourse to for the removal of this complaint. These consist of plasters with aloes, and turpentine, with aloes and rue, liniments of aloes and gall, &c.

CLXXXIII. The diet of children, as a preventative

of worms, should be regulated so as to avoid all fat and greasy articles. Food of easy digestion, and having rather an alkalescent tendency, should be preferred.

Convulsions (Convulsiones).

CLXXXIV. We have already noticed two forms of this complaint, which attack the first weeks of existence (p. 44 and 46): we now examine that form which injures the more advanced period.

CLXXXV. Its appearance differs nothing from that which attacks the adult. The body becomes either convulsed all at once, or the limbs; the jaws are locked, and the mouth filled with slime. In this state the child continues till sleep supervenes, from which it awakes pretty well, till the same appearances are renewed at intervals of various distance. It is divided into two species, the symptomatic and idiopathic.

CLXXXVI. Four causes of the symptomatic convulsion may be remarked:

The 1st is commonly seated in the primæ viæ, and consists in the aliment being converted into a thick viscid paste, adhering to the intestines, and not conveying a proper nourishment.

The 2d arises from the irritation of teething.

The 3d from the disappearance of a cuticular eruption or discharge; and

The 4th from worms.

CLXXXVII. The preventative treatment of convul-

sions from the first cause will depend on giving a nourishment as little adhesive as possible, and also preventing any accumulation of viscid matter in the primæ viæ, where a disposition prevails to form it.

CLXXXVIII. The first intention is answered by avoiding the farinacea as much as possible, particularly meal-pap, and giving in its place thin animal soup, as veal-tea and milk.

CLXXXIX. The second purpose is effected by the use of laxatives, as the castor-oil, occasionally repeated, with cordials interposed to prevent debility from its operation.

CXC. This cause of convulsions will generally be discovered by the previous symptoms, as the child being affected with loathings, costiveness, purging, by its pale countenance, large belly, and disturbed sleep.

CXCI. Where much irritability prevails, independent of the irritation of the primæ viæ, a vitiated atmosphere, want of cleanliness, and many other similar causes, are sufficient to induce this affection.

CXCII. Convulsions from the second cause mentioned, or teething, are easy to be removed by taking off the irritation by a division of the affected gum, or scarification; of which a more ample detail will be given under that head.

CXCIII. Convulsions from the third cause, or retropelled eruption, by a rash disappearing, or discharge drying up behind the ears, requires the use of the warm

bath, and every means of returning the eruption, or soliciting the discharge by blisters, &c.

CXCIV. We have thus considered the first species of convulsion, or the symptomatic. It more frequently occurs than the second, or idiopathic, which comes on without any previous symptom to account for it.

CXCV. Its effects are generally more formidable than the symptomatic; and, if recurring, this species is apt to be succeeded by the loss of the senses of sight or hearing, or a general injury of the intellects.

CXCVI. The treatment here requires the most active means, as removing general irritation by bleeding and blisters, and also attending to the state of the *primæ viæ*; after which, the use of antispasmodics will be proper.

CXCVII. Bleeding is best performed by leeches, as one or two on the foot, or behind the ears, which may be repeated once or twice. The blisters should be applied to the head, that is, as near as possible to the principal seat of the affection. The state of the *primæ viæ* should be kept loose by a proper use of laxatives; and, these means being premised, the antispasmodics employed may be, tincture of foot or of castor, sp. of hartshorn, liquid laudanum, oil of rue, musk, spermaceti, and oil of anise; the musk has been particularly recommended by some authors.

CXCVIII. The use of external antispasmodics is likewise a common practice, as oil of amber or water

of ammonia, applied to the back-bone, palms of the hands, and soles of the feet.

CXCIX. When convulsions, from their frequent repetition, assume something of a chronic form, issues, or setons and chalybeates, become the proper mode of treatment.

CC. In the treatment of all convulsions, much depends on being able to make the proper distinction when they are of an idiopathic or symptomatic nature, that is, to ascertain their cause.

CCI. One particular cause of convulsions requires to be mentioned, which is simply over-distension, the stomach being suddenly filled with an excessive quantity of nourishment. Whenever, therefore, a convulsion suddenly comes on, and immediately after feeding or sucking, this cause may be suspected, and the oppression of the organ is to be taken off by unloading it of its contents, either by irritation of the throat with a feather or finger, or by the immediate exhibition of an emetic.

CCII. When the cause is thus removed, the effect generally ceases.

CCIII. In some cases, also, convulsions appear as an effort of nature, either in ushering in, or giving a crisis to, certain diseases. Their treatment, therefore, must be guarded till their cause is ascertained.

CCIV. In forming our opinion on convulsions, the frequency of their recurrence, and the violence of

the fits where repeated, determines our prognosis respecting the actual danger of the attack.

Palsy (Paralysis).



CCV. Palsy is a rare disease in children: it does, however, occur at times, and that in different degrees, the same as in adults.

CCVI. Its attacks extend to different parts of the body, being sometimes confined to the upper, sometimes to the lower extremities; but its most common form is that of hemiplegia.

CCVII. The morbid effect produced by it is also in various degrees, from simple weakness of the limbs to a total abolition of their use.

CCVIII. The period of its attack is uncertain: it has been known so early as three days from birth, but in general it occurs at a more advanced period.

CCIX. The prognosis is here more favourable than in adults; but if not soon relieved, that is, in a few months, the disease becomes chronic, and, though life is dragged on, the patient seldom arrives at manhood.

CCX. The treatment of palsy in infancy depends much on exciting the proper action of the primæviæ, where the cause of the complaint is generally seated. For this purpose brisk purging is proper as a

leading indication. Blisters and external stimulants become also a necessary part of the cure; and, these means being premised, antispasmodics may be then conjoined, as the valerian, castor, prepared ammonia, æther, &c.

Electricity also may be attempted.

CCXI. This disease is often dependent on, or connected with, hydrocephalus; in which case, the same being once ascertained, the treatment proper for this primary affection becomes necessary, particularly mercury and diuretics, in preference to any other.

Epilepsy (Epilepsia).

CCXII. Epilepsy we formerly considered in a general way, (in vol. I. p. 72,) and also in this volume, under the forms of inward fits and tetanic spasm, as occurring soon after birth; but, when further advanced, it appears in children under the proper epileptic paroxysm or fit.

CCXIII. This form consists in the child suddenly and unconsciously falling down, when convulsion takes place, either with or without the loss of the senses.

CCXIV. The causes of this disease we referred to three species of irritation, to which a fourth may be added, as the irritation on particular glands towards the age of puberty.

CCXV. The progress of this affection is generally

suspended by this period of life; and, where it is not, there is very little expectation of a cure during the remainder of it.

CCXVI. Dissections of this disease, where fatal in children, shows always one of two morbid alterations, either a collection of water in the ventricles of the brain, or a small sharp point of bone projecting from the internal surface of the os frontis or sella turcica.

CCXVII. The treatment of this affection in children is to be attempted chiefly by

1. Removing abdominal irritation; and,
2. The use of tonics and antispasmodics.

CCXVIII. The first is performed by a proper exhibition of laxatives.

CCXIX. The second consists in the bark, chalybeates, and cold bathing; or in the use of opium, valerian, ol succini, musk, and other antispasmodics; not even omitting, where the case is obstinate, electricity.

CCXX. External irritation also, with blisters, is in some cases, towards the age of puberty, useful.

St. Vitus's Dance (Chorea.)

CCXXI. This disease was treated of in vol. I. p. 78. It consists in partial convulsions, or continual motion

of the extremities of one side, as there described, seldom extending its attacks beyond the fifteenth year. Its causes are, generally, predominant irritation in the primæ viæ, of various kinds, or else general relaxation of the system.

CCXXII. Attention, therefore, to the particular irritation, in the first passages, should precede every other attempt at a cure, by alteratives and purges; and, when this is found insufficient, tonics are then indicated, as the bark, chalybeates, and cold bathing. Sometimes, exciting a more powerful irritation, by electricity or dry cupping, has succeeded.

Night-mare (Incubus).

CCXXIII. Night-mare is an affection well known: it consists in a sense of oppression, weight, and tendency to suffocation, varying in its period of duration, and also in the degree to which it attains. It is an affection common to children as well as adults; and it can hardly be termed a disease, as they frequently outgrow it.—The fit, however short in duration, always leaves some unpleasant effects, as lightness of head, tremor, and anxiety; but these are merely temporary.

CCXXIV. The causes of this complaint are somewhat obscure. Spasm of the chest certainly takes place; and the flatulence and indigestion which prevail in it are merely concomitant symptoms. It is also frequently connected with the circumstances of growth, as it is known to depart after the age of puberty. Its causes,

however, are commonly referred to flatulence and indigestion, exciting spasm of the diaphragm and muscles of the chest, the stricture of which occasions the dread and sense of suffocation.

CCXXV. The treatment depends on rousing the patient by the use of volatiles or foetids, so as to terminate the fit; and afterwards to prevent its recurrence by attention to the state of the first passages.

CCXXVI. Particular food will be more apt to excite this irritation than others; and the propriety of abstinence, in regard to supper, is therefore pointed out. The use of tonics, in general, will render the patient less liable to be affected by spasm of any kind. Hence its prevention depends on proper diet, and the use of cold bathing.

Temporary Loss of Speech (Aphonia).

CCXXVII. Temporary loss of speech, or a difficulty in utterance, is frequent with some children, from the fourth to the seventh year. It forms in its attack only a temporary inconvenience, seldom exceeding a quarter of an hour at a time.

CCXXVIII. It depends probably on the same cause as the other convulsive affections during this period, and attention is always to be paid to trace the particular irritation to which it may be referred, as this points out somewhat the means of relief.

CCXXIX. The treatment consists in the use of local stimulants to the part during the period of the fit, as an infusion of lavender or mint, or else a decoction of pellitory; and, in the interval, applications to invigorate the system in general, and prevent its recurrence.

Excoriations of Skin.

CCXXX. Excoriations of different parts of the cuticular surface, either from its delicacy or particular causes of irritation, is a common complaint of children; but the part most liable to this, and requiring often a special treatment, is behind the ears.

CCXXXI. The chief sources of irritation producing this complaint are those of the bowels and teething; in both which cases it is considered as an effort of nature to relieve the irritating cause.

CCXXXII. It is divided into two species, varying only in degree.

CCXXXIII. In the first or simple excoriation, little is necessary in the treatment but cold washing, and the application of a mild astringent to the part, as a bit of singed rag, which is the popular remedy.

CCXXXIV. In the second species, when it passes into ulceration, and this ulceration spreads rapidly and gets dry, with a foul appearance and painful state of the sore, the indications then pointed out are,

1. To relieve the part by a neighbouring irritation, or the application of a blister to the neck; and,
2. To dispose it to heal by abating pain by the use of anodyne fomentations; and exciting the tendency to re-union by some mild mercurial liniment, particularly that with a proportion of calomel.

CCXXXV. To assist this treatment, some gentle alterative may be administered internally, consisting of any mild combination of z and antimony, or of z and sulphur, or the calomel and cinnabar of antimony, or Æthiop's mineral.

CCXXXVI. When this species of ulcer shows, as sometimes happens, a tendency to mortification, the bark is then indicated to be used externally in the form of fomentation, and also internally in such quantity as the age of the patient admits.

Auricular Abscess.

CCXXXVII. Matter discharged from the ears in various quantities, and also with various appearances of inflammation, both in degree and extent, are common to childhood.

CCXXXVIII. Such complaints are most frequently the attendant of a scrofulous constitution.

CCXXXIX. It is generally treated as a common inflammation, by the use of laxatives, and attention to the discharge of the matter, by the position of the child

when in a recumbent posture. Where this is not sufficient, deterfive injections are then employed, consisting of some mild astringent wash; and, failing of these means, some warmer stimulant is then applied, of which a detail is given, vol. I. p. 218, and vol. II. p. 213, under the article Deafness.

CCXL. When the disease appears to resist this treatment, an issue may be opened near the seat of it, or the nape of the neck, mild mercurials internally exhibited, and fumigation with sulphurated γ applied to the part.

Fever (Febris).

CCXLI. The extremes of age are generally experienced less disposed to the attack of proper fever; and hence old people and children often escape in the most virulent stages of febrile contagion. An infant will often continue to suck, during the progress of the malady its diseased parent, to the last minute of existence, and remain afterwards untainted by infection. It is the prime of life, the *flos juvenæ*, that is the victim of the disease.

CCXLII. The fevers of children, therefore, arise only from the causes already discussed, viz. teething, disorder of the *primæ viæ*, glandular affections, cutaneous disease, specific contagions peculiar to this period of life, or simply the application of cold. It is the consideration of this last, therefore, that claims our attention.

Catarrhal Fever (Febris Catarrhalis).

CCXLIII. This fever, or more properly catarrh, is distinguished by cough, hoarseness, and difficulty of breathing, with affection of the nose and eyes, only varying from the catarrh in the adult by the violence of its symptoms.

CCXLIV. Its treatment, therefore, in infancy, requires more attention to counteract this violence, by lessening the irritation on the breast by a blister or blood-letting. A blister may, therefore, be applied to the region of the stomach; and, if not effectual in the relief procured, may be succeeded by a leech or two on the foot, as the most convenient situation. Along with this, when there is much phlegm, an emetic may be exhibited; and, after its operation, oily medicines had recourse to, to quiet the irritation of the cough. The bowels are to be kept loose by small doses of antimonials, or else by common laxatives.

Stomachic Fever.

CCXLV. Where the fever does not partake of this catarrhal form described, or where difficulty of breathing prevails without a corresponding degree of fever, it is most probably connected with, or dependent on, irritation of the stomach, and accumulation of bile may exist as its cause. The state of the stomach, therefore, forms here the leading indication; and should precede every other treatment, an emetic being exhibited for its evacuation.

Intestinal Fever.

CCXLVI. In the same way accumulation in the intestines may produce a similar morbid state; and when the emetic is not fully effectual, or relieves only in part, laxatives and the testacea may be also given; or, should a partial alleviation only attend this plan, more powerful purgatives are then pointed out, as the castor oil, and compound scammony powder, or calomel.

CCXLVII. From the glutinous tendency in the excretions of the bowels of infants, this cause of accumulation should always be looked to, and every attack of febrile symptoms should be suspected as connected with it, the treatment of which will often prove successful in affording relief.

CCXLVIII. When the progress of the fever resists this treatment, saline draughts are then to be had recourse to, simply, or combined with the vinum antimonii; by a due perseverance in which the disease will come to be removed, or at least so far mitigated as to yield to the use of the bark, which should then be exhibited in a light decoction.

CCXLIX. These fevers in infants are often succeeded by peculiar consequences not so common in adults, and which may be termed a sort of secondary affection.

*Consequences of Fever.**Cutaneous Eruption.*

CCL. The first to be noticed is a cutaneous eruption in the form of the red-gum or of the thrush. The former is to be considered always as a favourable symptom, but at the same time a mark of the violence of the preceding fever: the latter, or thrush, when appearing, is rather to be regarded as an unpropitious appearance, and often fatal in its consequences.

Cervical Pain and Tumor.

CCLI. The second consequence of preceding fever in infants is pain, swelling, and stiffness of the neck, often drawing the head to one side. This affection requires the application of heat and embrocations, to which it soon yields.

Intermittent Fever (Febris Intermittens).

CCLII. The ague is not a disease very frequent in childhood. In particular situations, however, it does occur, and its consideration is therefore proper here.

CCLIII. Its symptoms are the same as in the adult, consisting in a regular succession of cold, hot, and sweating fits, with the intermission of a certain period before their repetition; and this intermission is chiefly distinguished by a high-coloured urine, with a laterious or sediment.

CCLIV. The periods of the season most common for the attack of this fever is spring and autumn; and the form it appears in, in this climate, is the tertian, or that which gives an intermission of 48 hours between the paroxysms.

CCLV. Children, within the year, have been known to be the subjects of it; and wherever general, in any situation, infancy never escapes its attack: a circumstance in which it differs from other species of contagion.

CCLVI. The prognosis in this disease is always favourable; and, when obstinate, it has been known to yield to the attack of another disease, particularly the small-pox; a proof its contagion is of a debilitating nature.

CCLVII. The cause of intermittent fever, is clearly one source, marsh miasma, or that arising from a low damp situation, acted on by heat; but in infancy the disease is often combined with disorder of the primæ viæ, frequently with worms, or else with obstructed biliary secretion.

CCLVIII. The specific for this disease in adults is the bark; but in infants it is difficult to employ it. Hence the cure is more uncertain; and the treatment therefore, requires to be more varied.

CCLIX. It is generally, as in other cases, premised by an antimonial emetic. This is succeeded by small dose of James's powder during the period of fever, and purges of rhubarb and calomel during the intermission.

or, instead of this, saline draughts are repeated every six or seven hours; or diaphoretics, as the crude sal ammoniac in a few grains, myrrh, and cream of tartar, or aromatics.

CCLX. When the bark is employed at this early period, it is often quilted in a waistcoat, worn next the skin, or applied in a large poultice folded up in thin linen or gauze; and applied warm on the region of the stomach, being occasionally renewed. When given internally to infants, it should never be on an empty stomach.

The remedies for this disease, invented by ignorance or superstition, are numerous. Thus whatever can be conceived disagreeable to the taste or appearance has been occasionally employed, and whatever, by its poignancy or stimulus, can excite the action of the system. Hence spiders' web in wine, pepper and alum, flour of sulphur and brandy, and a thousand others, have been held up as specifics.

CCLXI. In infancy the ague-cake, or obstruction of the liver, is not so frequent a consequence of the disease as in adults. When occurring, it yields to the use of calomel and bitters.

General Remarks on Infantile Fevers.

CCLXII. First, Most of the fevers of infancy possess an inflammatory tendency, or resemble synocha; they are, therefore, acute, and of short duration.

CCLXIII. Second, Wherever a fever is protracted in infants, it assumes the remittent form.

CCLXIV. Third, The fevers of children most commonly arise from slight accidental causes, either connected with the primæ viæ or the state of the skin. In their treatment these causes are always to be had in view, and the clearing the first passages, and producing a free determination to the skin, are the chief objects to be regarded.

Dentition (Dentitio).

CCLXV. Teething is the most critical period of infancy. During it the fatality is reckoned at one-tenth of the species, and its morbid effects depend much on the state of the system with respect to its tendency to inflammation. This subject we already considered in vol. II. p. 41, in a cursory manner: we shall now consider it more minutely here.

CCLXVI. The period when infantine dentition is complete is three years; from six months, therefore, to that period, the constitution suffers from a constant irritating cause acting upon it. Its sufferings, however, will depend much on the interval which occurs between the successive protrusion of the teeth. This varies considerably in different children, and also in the same child, from different circumstances in the teeth themselves, extending sometimes from a month or less to half a year, and so on.

CCLXVII. The general prognosis formed in dentition is, that the extremes of health and debility are equally

dangerous during the eruption; for, stout children and irritable weak ones both suffer alike from it. Dentition is also easier in winter than in summer; fat children are more affected by it than lean; and the occurrence of diarrhœa is always a favourable symptom.

CCLXVIII. The commencement of dentition varies also in different children. In stout ones it appears soonest; but in the weak and ricketty it is often protracted to a late period, even the length of two years, before any appearance takes place.

CCLXIX. In the progress of dentition the two front teeth in the lower jaw are commonly cut first, the one following the other at the distance of fifteen days. The large ones of the upper jaw appear soon after, sometimes at the same time. A considerable period then elapses, till the eye-teeth appear, one on each side, successively; the rest of the canini follow; and, last of all, the molares. This process, however, is by no means so regular,—a protrusion of teeth frequently occurs all at once: in other cases the small molares frequently appear before the canini, and the latter again before the eye-teeth.

CCLXX. In regard to the different figure of the teeth influencing their protrusion, it may be observed, that the molares, from their bluntness, are attended with most considerable irritation, and that diarrhœa always marks their cutting; that the canini are next to them, from their middle being the thickest part; and that the incisores give least pain, from their sharp point allowing the whole tooth to pass.

CCLXXI. From the fourth month every cause of indisposition affecting the child is generally referred to the head of dentition; but those symptoms which more especially distinguish it are:

1. A tendency to drivel or slobber much, with starting, and thrusting the fingers into the mouth.
2. Expansion, heat, and swelling of gum.
3. A circumscribed red or hectic flush on the cheek.
4. Eruptions on the face and scalp.
5. Diarrhoea, with its usual irritation, or griping and morbid stools.
6. Spasms, and general irritation of the nervous system, preventing sleep.
7. Alteration in the secretion and appearance of the urine; and,
8. Sometimes swelling of the extremities, though rare.

CCLXXII. From this view of the common progress of dentition, and its attendant symptoms, it is proper to consider the treatment the latter require when so violent as to form a real morbid state.

CCLXXIII. The causes which influence them in their violence are:

1. The degree of action in the source of irritation, or in the protruding teeth.
2. The irritability of the system; and,
3. The presence of other affections at the same time.

CCLXXIV. The constitutional symptoms to which these causes give origin are chiefly fever and convulsions.

Dentile Fever.

CCLXXV. The fever here is to be treated on the same plan as the synocha or inflammatory species. Bleeding with a leech or two behind the ears will be occasionally proper; but this evacuation, with children, requires much restriction.

CCLXXVI. Diarrhoea is a symptom always favourable, and should therefore be kept up in a moderate degree; or, if costiveness prevails, it should be even excited by the usual means of laxatives.

CCLXXVII. Dilution, when sucking is not permitted, should be particularly attended to, and small quantities of light food only given at a time, as the action of the stomach is generally somewhat impaired, and digestion imperfect.

CCLXXVIII. In retention of urine during this period glysters are necessary; but the warm bath is still more useful. Antimonials, which preserve diarrhoea, and likewise act on the skin, are here proper auxiliaries.

CCLXXIX. As directing somewhat the propriety of the treatment, the existence of a diarrhoea and cutaneous eruption, it may be remarked, always give dentition a favourable and mild termination.

CCLXXX. This diarrhoea often occurs spontaneously during dentition, to a violent degree, and for a long continuance. During this period, however, the constitution of the child wonderfully supports it; and that continued action of the irritating cause gives a temporary vigour, which enables the child soon to recover it.

CCLXXXI. When very violent, however, it may be restrained by a moderate use of the testacea, with the contrayerva powder, or a small proportion of an antimonial, as the James's powder; or by a dose of the diluted compound spirit of ammonia, or even a drop or two of laudanum. But, though moderated, it should never be entirely stopped.

CCLXXXII. But, besides the bowels, the irritation of dentition is, at times, also extended to the lungs, assuming the form of peripneumony; and it is during the cutting of the canine teeth that this form is apt to appear.

CCLXXXIII. The treatment here does not vary from that already recommended, viz. the promotion of diarrhoea; but besides this, from the alarming nature of the symptoms, particular attention is necessary to remove the local irritation or cause, by assisting the protrusion of the teeth in the manner afterwards directed.

CCLXXXIV. This, then, forms the usual treatment of the first and most general morbid state attending dentition; we are now to examine the other, or the attack of convulsions.

Dentile Convulsions.

CCLXXXV. Dentile convulsions are preceded by uncommon starting in sleep. Their distortions are more confined to the muscles of the face than the extremities; and they are often preceded by a hoop or catch in the breath.

CCLXXXVI. The irritation being then strongest, they are most apt to occur on the teeth cutting the periosteum.

which, more than the other parts of the gum, resists their protrusion.

CCLXXXVII. Besides the general management already detailed for the treatment of fever, the local means here demand particular attention. These local means consist in the application of blisters behind the ears or to the back; but the most certain relief is experienced from the division of the gum, and removing the cause of irritation by the operation of scarification.

CCLXXXVIII. Wherever symptoms of dentition produce the morbid symptoms described this operation should never be omitted; it should be begun early, and should be occasionally repeated, according to the urgency of symptoms; and it should never be entirely given up, but on the complete protrusion of the teeth.

CCLXXXIX. Pain and fever often arise from the first appearance of dentition; and in these cases, though no protrusion can be expected for weeks, still the operation will give considerable relief, and the discharge of blood in this way will be more useful than even the application of leeches.

CCXC. The consequences attending this operation are always trifling, as it can neither tend to injure the future teeth nor thicken the gum, if properly performed. It is always called for, wherever convulsions arise, as the certain and primary means of relief; for, by thus removing the cause, the effect cannot fail to cease.

CCXCI. In doing it, the great object is to remove all

the source of irritation, or unloose the whole protruding edges of the teeth that are advancing. If one point is left acting upon a portion of the undivided periosteum, the morbid symptoms will still continue. As much, therefore, depends on the operator as the operation.

CCXCII. The operation is performed after securing the child, as directed in vol. II. p. 230, by the surgeon opening the mouth with one hand, while with the forefingers of the other he introduces the fleam, or instrument, and makes a conical incision along the gums; for it must extend so as to relieve every tooth immediately advancing, and for such depth as to lay the tooth or teeth bare. If the symptoms are removed by it, the operation may then be considered as complete. Should they, however, recur after a certain time, it is again to be repeated; and, in performing it, attention should then be paid to make the division somewhat different from the former, in case any part, during the former operation, has been omitted.

CCXCIII. The propriety of the operation seems even pointed out by the propensity of children themselves to remove the existing irritation, by lessening the sensibility of the gum. Hence we find them fond of the use of hard substances, which, by their pressure against it, may have this effect. On this point, however, a question has arisen among practitioners, how far the use of such substances are proper, or should be allowed. In high degrees of irritation it is clear, when the gum is already in an inflamed state, their action must increase this; but, when the irritation is slight, by assisting the eruption, their application may be allowed, though, in-

stead of the coral, a piece of liquorice-root, or crust of bread, is preferable to any other.

CCXCIV. In high degrees of inflammation, cooling and sedative applications to the mouth will be proper, as a little honey diluted with weak vitriolic acid, syrup of white poppies, &c.

CCXCV. The use of these last applications is particularly indicated where the gum becomes ulcerated in dentition; and, if ineffectual, astringent applications are to be had recourse to, as a solution of white vitriol or alum made with honey; and, failing these, it is then to be treated as a different disease, under the head of Canker.

CCXCVI. During the period of dentition, from the symptoms of irritation existing, and the general tendency to an inflammatory state, the child, if otherwise pretty strong, should be confined chiefly to the breast, and the quantity of additional nourishment diminished.

Affections of Throat.

CCXCVII. Of sore throats, or cynanche, children are subject to two peculiar species; the mumps and croup.

Mumps (Cynanche Parotidæa).

CCXCVIII. The former is a swelling of the neck and throat, or the parotid and maxillary glands, from the

appearance of which the name is derived; attended with respiration and deglutition little impeded, and inflammatory fever generally flow.

CCXCIX. The first symptoms of this affection are marked by the common attack of slight fever, with white furred tongue, soon succeeded by stiff painful neck, and some foreness of the throat. The pain and swelling of neck increase, which discover, on examination, a fulness and tenderness to the touch; these, in some cases, are aggravated to acute recurrent pain. The swelling continues its progress for two or three days, when it begins to subside: but in other cases, as the disease advances, the skin often assumes inflammation. There prevails, however, little tendency to suppurate.

CCC. This disease is most frequent in its attacks towards the age of puberty; though it is also frequently met with at an earlier period. It terminates in three different ways; either by resolution, which is most common, when the swelling gradually departs, and the glands assume their natural state; by suppuration, which is more rare, when the skin gives way, some matter is discharged, and the sores heal kindly; by translation, when the affection, leaving the glands of the throat, attacks the testicles, attended with acute fever, inflammation, and swelling; and, after leaving the testicles, it is again translated to the brain, or assumes the form of phrenitis. This termination by translation only occurs towards the age of puberty; and is more frequent in some other climates than this.

CCCI. The treatment of this disease is, in general, very simple; some mild diaphoretic, and an occasional laxative, being all that is required. But particular cases must be regulated by the prevailing symptoms. If much fever attend, bleeding will then be indicated, and the use of antiphlogistics, as the saline draughts, nitre, &c.: while weakness, on the other hand, which more rarely takes place, must be counteracted by an opposite plan, or the use of cordials and stimulants.

CCCII. When, after the disease, an affection of the glands still remains, and some hardness and swelling is felt, discutients will then be proper to the part, as the mercurial liniment or ammoniated oil, with the occasional exhibition of a laxative.

CCCIII. In all cases of translocation an active and rigid antiphlogistic course will be proper, as in other instances of acute inflammation.

Croup (Cynanche Trachealis).

CCCIV. Croup is a disease formerly treated in vol. I. p. 15. Its symptoms are, a sharp shrill cough, with stridulous noise; laborious or wheezing respiration; flushed face, increased to livid during each paroxysm; little external swelling, and general fever.

CCCV. This disease has been divided by late authors into the inflammatory and spasmodic, which require a distinction in regard to their modes of treatment.

CCCVI. The former, or the inflammatory, is gradual in its attack, and is preceded for some days by slight feverish symptoms, with a teasing short cough, before it assumes the characteristic marks of the disease; after which the symptoms uniformly increase in violence.

CCCVII. The latter, or the spasmodic species, is sudden in its attack, which is usually during the night; and it often also intermits, or has intervals of alleviation, during its progress, in which it differs from the former.

CCCVIII. The causes of this disease have been ascribed to cold and moisture; but late authors have contended for its arising from a specific contagion, and consequently for the infectious nature of the disease. These facts, however, are still not sufficiently established. It has also been said that this disease has been occasionally met with in adults, contrary to former opinions on this subject. Children, however, newly weaned, are the most frequent victims of it.

CCCIX. Two stages are remarked in the progress of this complaint:

1. The inflammatory, which is terminated by the serous exudation, or thick discharge, lining the trachea the peculiar characteristic of the disease.

2. The mucous stage, when the trachea and its branches are now choaked up by this collected discharge, formed into a membrane or reduced to a solid state.

CCCX. The formation of this last stage is denoted

by the urine, formerly clear, becoming turbid, and depositing, as well as the trachea, a sediment or exudation, the effect of the disease.

CCCXI. The prognosis in this disease is generally unfavourable, particularly in the inflammatory species, which is always of short duration, but is often deceitful from apparent remissions; and recovery, when it takes place, is almost entirely confined to the spasmodic kind.

CCCXII. The treatment here must be varied according to the particular species of the disease: in the inflammatory species, topical bleeding, by means of leeches applied to the trachea, and more general bleeding, should be employed; but it will be only useful in the earliest stage of the disease, and, if relieving, should be repeated. Emetics here, particularly antimonials, form a sovereign remedy when employed in time, and blisters will be found useful applied to the throat and nape of the neck, and also inhaling the steams of warm vinegar.

CCCXIII. In the second species, or spasmodic, *assafoetida*, given both by the mouth and glyster, is a medicine highly commended: it may be succeeded by the bark: *cicuta* is also employed, and other antispasmodics.

CCCXIV. Mercury has of late formed a favourite medicine, in the form of calomel, frequently repeated, and in liberal doses. Mercurial unction, also, is used to the throat.

CCCXV. This disease is sometimes combined with other affections, particularly hydrocephalus, when it proves fatal from this last cause.

Coughs (Tusses):

CCCXVI. Cough is a common complaint of infancy, and arises from a variety of causes, being more frequently symptomatic than a primary affection.

Symptomatic Coughs.

CCCXVII. The cough attending on acute febrile diseases is soon known, from the rapid progress these diseases make, and from the other circumstances which accompany their attack. Here the treatment is connected with the primary disease.

CCCXVIII. Cough, also, from cold, is marked by catarrhal symptoms, and is generally temporary in its nature. When connected with a glandular affection, loss of strength and hectic fever accompany the progress of cough, and point out the cause.

CCCXIX. Cough from teething is marked by the particular period of its appearance, and the other symptoms taken notice of under this head. (*Vide Dentition.*)

CCCXX. This complaint, however, when arising from disordered primæ viæ, is often difficult to detect:

it is chiefly done by the presence of costiveness, or the offensive state of the eructations and alvine discharge: it is also most severe during the night.

CCCXXI. The removal of this cause of irritation must be effected by purgatives, joined with soap and alkalis; as described under the head of Abdominal Complaints.

Primary Coughs.

Chincough. (Pertussis).

CCCXXII. Of coughs, as a primary affection, one of the most frequent is chincough.

CCCXXIII. The chincough, or whooping-cough, is a contagious disease, attacking in paroxysms of a convulsive suffocating cough, with loud noise or hoop at each respiration, and generally terminating by vomiting.

CCCXXIV. It usually begins as a common cough or cold, and continues for some time without any marked or peculiar symptom. There is generally, at first, the presence of fever, having an evening exacerbation, which is various in its duration, and often attends the whole progress of the disease. Soon, however, the fits of coughing become to be marked by the loud noise, or hoop, the peculiar feature of the disease. At first there is little or no expectoration: as the disease advances, it comes on, at first thin, and gradually thickens in consistence. The fits are always more severe

during the night than the day, and are at times so violent as to threaten strangulation, the face and neck becoming perfectly livid, till respiration is recovered, and hæmorrhage likewise taking place from the nose and different parts. The fit often terminates in a faint, though the appetite, on recovery, immediately returns.

CCCXXV. This disease is probably the product of a warmer climate, and imported into Britain like many others, and it is only of late years that its proper treatment has been understood.

CCCXXVI. It is clearly the effect of a specific contagion of a peculiar nature, and highly active, affecting, like the small-pox and measles, but once in life.

CCCXXVII. The primary seat of the disease seems evidently, from the symptoms induced by the paroxysm, to be the larynx, which is thrown, in consequence of a morbid irritability, into spasm. How much further the morbid cause extends in its specific action is not yet determined, though, in its consequences, it appears to bring the whole respiratory organs into a diseased state.

CCCXXVIII. Our prognosis is determined by three circumstances: the period of life, vomiting, and hæmorrhage.

CCCXXIX. After the age of six years the disease is seldom fatal; but very young children, from their irritability, frequently sink under it. When the fit terminates by vomiting, it is always reckoned a favourable

symptom, and a hæmorrhage from the mouth, nose, and ears, relieves the more urgent symptoms.

CCXXX. Fever and laborious respiration are the two circumstances indicating an unfavourable issue.

CCCXXXI. The treatment of this disease must be regulated by the prevalence of the two leading symptoms, fever and spasm, and the degree of violence they display.

CCCXXXII. When the fever is strong, bleeding becomes clearly indicated, as well as blisters, the use of mild diaphoretics, as the saline draughts, and also laxatives.

CCCXXXIII. When the spasmodic state again is more predominant, and the symptoms of fever mild, emetics will be highly useful; and antispasmodics, as the asafoetida, camphor, castor, oil of amber, &c.

CCCXXXIV. Where the cough only is troublesome, and the other symptoms mild, an opiate, either in the form of the tincture of opii or syrup of poppies, at bedtime, will be useful. Cicuta is much used with the same view.

CCCXXXV. External applications are also at times useful, as rubbing the hands and soles with sp. of ammonia, frequently applying oil of mace or amber to the spine and pit of the stomach.

CCCXXXVI. When the disease is recurrent, and

returns some time after its apparent departure, an emetic, opening the bowels, and the use of antispasmodics, will quickly remove it.

CCCXXXVII. A change of air is very useful for the consequences of the disease; and a milk and vegetable diet should at the same time be conjoined.

Common convulsive, or spasmodic, Cough.

CCCXXXVIII. This complaint is marked by the same appearance of cough as chincough; but no fever attends it: it differs also from catarrh in the absence of the catarrhal symptoms; and also in antiphlogistic remedies having no effect.

CCCXXXIX. This complaint occurs most frequently in children from two to four years of age: it is often very severe, and assumes the form of spurious peripneumony; but it is always aggravated by the antiphlogistic treatment.

CCCXL. In all cases it yields to antispasmodics, particularly the cicuta; and if much phlegm or expectoration is present during the use of this remedy, an emetic may be interposed. The cure will also be assisted by the junction of the bark.

Cutaneous Diseases (Morbi Cutanei).

CCCXLI. The cutaneous diseases of children are

very numerous, and much varied in their appearance: it is proper, therefore, to bring them into one view.

CCCXLII. They arise, in general, from three causes; viz.

1. Affections of the primæ viæ.
2. Teething; and,
3. Specific contagion.

CCCXLIII. When their origin is doubtful, our opinion is to be regulated by the symptoms that attend or precede them, by the period of their appearance, and by the prevailing epidemic at the time.

CCCXLIV. All cutaneous eruptions have a remarkable tendency to break out about the face and head; as a resistance, from its exposure to the influence of external causes, is there most powerfully given to the freedom of the natural discharge; and on the head, especially, this discharge, when vitiated, has its fixed parts condensed, and formed into scales, crusts, and scabs, by adhering to the hair.

Rash (Effer).

CCCXLV. The most simple cutaneous affection that occurs is what is termed the Rash.

CCCXLVI. Its seat is most generally the face, neck, and breast: its appearance is most common about the decline of summer, or the months of August and September: it is equally sudden in its eruption and depar-

ture. A little sickness is apt to arise when this last takes place, but it is merely temporary.

CCCXLVII. This disease is generally attended with some disorder of the primæ viæ, and commonly arises from a change in the milk, in consequence of overheating on the part of the nurse, or some accidental irritation from what she may have taken, or else from teething. By this cuticular appearance the original disorder is relieved; and such morbid appearances are to be considered, therefore, as an effort of nature to relieve the internal parts.

CCCXLVIII. Such kinds of rash require no special treatment; but, in order to understand their cause, the state of the primæ viæ, as formerly observed, should be a leading question in investigating the nature of all children's complaints.

Bastard Itch (Pfora Spuria).

CCCXLIX. Bastard itch is an eruption affecting the face, with watery-headed vesicles and foul blotches, resembling in its appearance the common itch or pfora: it is chiefly peculiar to the period of teething, and the decline of acute febrile or intestinal complaints.

CCCL. Its appearance gives relief to the morbid symptoms, when severe, at this period; and no particular treatment is requisite for it, further than what belongs to common rash, except perhaps a more particular attention to avoid cold.

Milk Blotches (Crusta Lactea).

CCCLI. The crusta lactea, or milk blotches, is an eruption of white vesicles, which assume a dark colour, resembling the blackening of the small-pox, and are succeeded by scabs producing an ichory matter, attended with considerable itchiness.

CCCLII. The situation of this affection is generally the forehead and scalp, extending half-way over the face, and at times even proceeding farther.

CCCLIII. The period of its attack is the time of teething, and its effect is to lessen the irritation in the system from this cause. Hence it is considered by many in the light of a critical discharge.

CCCLIV. The duration of this affection is various: it continues sometimes for months, but generally disappears on the cutting of some teeth; in some cases, again, it is known to appear long before the period of teething, and departs even before this process takes place: its duration is judged of by the appearance of the urine, which, when thick and foetid, is thought to be short.

CCCLV. The treatment consists in doing nothing but leaving it to nature: if, however, it is very extensive, and the patients are uneasy, an issue, joined with the use of a sulphureous mineral, will tend to remove it. All absorbents and alteratives are generally ineffec-

tual. The viola tricolor, in decoction, has been recommended, where the disease is obstinate, as a specific.

Anomalous Eruptions.

CCCLVI. Under this term we may comprise the various defecations of the skin which attack children during the period of teething, and which seem to depend for their particular appearance on the peculiar constitution of the child. In some cases they resemble the measles, and are preceded by some of the symptoms of them, as sickness of stomach and fever; in other cases they form large bright red spots, and degenerate into the appearance of petechiæ, succeeded at times by round tumours in the legs. In other cases they show the eruptions of scarlet fever, and are chiefly distinguished from it by the mildness of the symptoms.

CCCLVII. All these appearances are to be treated by moderating the state of fever, if any appears, by mild antimonials, and by attention to the state of the primæ viæ, from their critical nature.

Nettle-Rash (Urticaria).

CCCLVIII. This is a rash affecting the breast and lower limbs, with an appearance resembling the stinging of nettles.

CCCLIX. It is sudden in its attack, and preceded by much screaming on the part of the child, and often disappears in the course of a few hours.

CCCLX. Its treatment requires the use of some mild sudorific, as the contraserva powder, or absorbents, with ammonia; and attention to the state of the bowels.

Phlyctenæ.

CCCLXI. Phlyctenæ consist of vesications or blisters similar to burns, varying in their size and the period of their continuance, which is generally some days. They contain an acrid lymph when opened.

CCCLXII. Their usual situation is the belly, ribs, and thighs.

CCCLXIII. The indication pointed out for their treatment is the use of absorbents, and the particular choice of these must be regulated by the state of the primæ viæ.

The Scorbutic Eruption of Infancy.

CCCLXIV. This is an eruption which discharges a thin sharp ichor, and infects the face and neck, attended with excoriation wherever it touches.

CCCLXV. In its treatment it is very difficult of cure. The expressed juice of the fum aquaticum, or water-parsnip, has been reckoned specific for it, and is given in the quantity of from one to four or five table-spoonfuls a day, mixed with an equal quantity

of milk; attention being paid, in the mean time, to the state of the primæ viæ.

Grocer's Itch.

CCCLXVI. This eruption appears in some parts like the points of pins, with watery heads; at other times as large as peas, which do not itch or feel sore; but it appears also frequently in foul blotches, which degenerate into scabby sores.

CCCLXVII. The same appearances are renewed in succession, and continue for months, leaving the skin at last of a dirty hue.

CCCLXVIII. It appears chiefly in a cold season, beginning about the arms and thighs, and extending to the other parts, frequently over the whole body.

CCCLXIX. This eruption is not necessarily connected with the teething, for it often appears without it. It is also known to depart on the protrusion of some teeth. It has been known, at times in its progress to be communicated to the mother.

CCCLXX. Its treatment consists in the use of some mercurial alterative, as the Æthiop's mineral and the hydrargyrus cum cretâ; but external applications must at the same time be conjoined, particularly equal parts of the sulphur and nitrated mercurial ointment.

Herpes.

CCCLXXI. A species of herpes, or broad ring-worm, is very apt to affect those parts of the child that are fretted by its drefs. The skin exhibits a very inflamed appearance, without much pain.

CCCLXXII. This affection often precedes teething, and is always connected with some disorder of the bowels. The nurse's milk has been found here in fault from its age.

CCCLXXIII. The treatment here consists in attention to the state of the primæ viæ by the use of absorbents; and, if continuing, in changing the milk on the child.

General Axioms.

CCCLXXIV. In the treatment of these symptomatic eruptions, the following conclusions may be drawn:

1. That being of a critical nature, they are never hastily to be repelled by external applications.
2. That, in all cases, the irritation of cold should be carefully avoided.
3. That the regulation of the primæ viæ is a leading indication, whatever the nature of the eruption be.
4. That the sudden attack of morbid symptoms, on the disappearance of an eruption, requires its being immediately recalled by the most powerful means, as the warm bath and sudorifics; and,

5. The external applications to eruptions should be no more than diluted kali, or the mildest washes and powders.

CCCLXXV. We have now considered the principal cutaneous complaints that arise from teething and affections of the primæ viæ; we are next to examine those which are the effect of specific contagion.

CCCLXXVI. They admit a division into two species, the acute and chronic.

1. *Acute contagious Eruptions.*

Small-Pox (Variola).

CCCLXXVII. The first and most frequent disease of this class is the small-pox. We already considered it in a general way, in vol. I. p. 41; we are now to examine it as peculiar to the infantine state alone.

CCCLXXVIII. The small-pox is a fever generally of the inflammatory or typhoid species, attended with a local inflammation and pain of particular separate points of the internal and external surface, forming an eruption. The appearance of this eruption is from the third to the seventh day of the fever, terminating in eight days from this appearance by the falling off of crusts, which leave a pit or mark behind.

CCCLXXIX. The principal phenomena that require attention in the history of this disease are;

1. The succession of the eruption.

2. The preference it displays to certain parts of the body in its seat; and,

3. The nature or progress of the eruption itself after its appearance.

CCCLXXX. With respect to the first, the eruption begins first about the face, and appears more slowly about the extremities, and frequently an interval of some days elapses before it is complete on the latter.

CCCLXXXI. In regard to the second, the eruption is always in greatest quantity on these parts most exposed to the external air, as the face, hands, and feet.

CCCLXXXII. With respect to the third, the appearance of the local inflammation or pock, and its progress, regulates our opinion on the termination of the disease.

CCCLXXXIII. It is in consequence of this appearance the disease has been commonly divided into two species, the distinct and confluent.

CCCLXXXIV. The distinct kind is ushered in by strong symptoms of inflammatory fever, the most striking of which are great rigor or cold fits, much sense of debility, and torpid state, with pain at stomach when pressed on. Sleep is disturbed by frequent startings, the lower extremities feel preternaturally cold, and epilepsy or nasal hæmorrhage is a frequent immediate forerunner of the eruption.

CCCLXXXV. The symptoms of the next or middle period are marked chiefly by abatement of fever, the changes in the progress of the pustules, which acquire their proper figure and size, discovering a whey-coloured vesicle on the top, surrounded below with an inflamed circular margin. This period is attended with some swelling on the face, which, subsiding, is renewed in the hands and feet.

CCCLXXXVI. The symptoms of the third, or declining, period of the disease, are marked by some recurrence of fever and affection of throat, attended with discharge of saliva. These, however, soon abate.

CCCLXXXVII. The distinct small-pox, then, is divided into three periods in their progress: the period of eruption, which extends to the sixth or the seventh day after the eruption; the middle, or maturing, period, which extends from the termination of the former to the eleventh or fourteenth day; and the period of blackening, which extends from this last to the disappearance of the disease.

CCCLXXXVIII. The prognosis in this species is directed by the state of the fever; for, where the head remains unaffected, no danger attends the disease.

CCCLXXXIX. The treatment of the distinct species is very simple. The application of cold constitutes the principal remedy, and this is done either by a free admission of cold air, or, when the febrile symptoms are strong, joining with it cold affusions. Cold affusion, in its application, should be instantaneous, and applied

during the height of the hot-stage; for, if done at any other period, it is apt to do harm.

CCCXC. Besides this general treatment, attention is to be paid to the state of the primæ viæ, and the affection of the throat.

CCCXCI. The first consists in the use of cooling purgatives, with acid and detergent drinks; or, where the fever is strong, in the use of antimonials that possess a tendency to pass downwards.

CCCXCII. The affection of the throat is to be treated by a proper use of diluent gargles and washes, to remove the viscid mucus; and, if deglutition is much impeded, blisters may even be applied externally to diminish it.

CCCXCIII. The confluent small-pox is preceded by epilepsy and fever, with violent nervous symptoms which attend their progress. Every symptom is here more severe than in the former species; and thus the disease may be said to differ from the distinct kind—

1. In the period of its eruption.
2. In the progress of its fever; and,
3. In the manner and formation of its pustules.

CCCXCIV. The period of eruption, or first stage, is generally finished so early as the third day, when they appear in clusters like measles. The progress of the fever, or second stage, is not interrupted by this appearance, but rather increased in its symptoms and violence, and the progress of the pustules is marked by an erysi-

pelatous inflammation, the vesicles remaining flat and ferous, without proper suppuration, or rising to any eminence.

CCCXCV. The confluent small-pox, then, like the distinct, is divided into three stages, the progress of which, from the violence of their symptoms, is sooner completed. The period of eruption extends from the time of infection to the third day; the period of maturation, from this last, never exceeds the eleventh day; and the third, or blackening period, is finished at farthest by the fourteenth.

CCCXCVI. The attendant symptoms of the third stage are here often uncommonly violent. The swelling of face begins at an early period. The flow of saliva, confined in the distinct kind to the third stage, is constant here, from the period of eruption; or, instead of it, a putrid diarrhœa attends. The affection of throat is also more considerable, and hæmorrhages are frequent from different parts.

CCCXCVII. From this history of the disease, the prognosis to be formed is generally unfavourable; and its fatality is judged of by three symptoms: the violence of the fever, as marked by the increase and frequency of rigors; the obstinacy of the diarrhœa; and the petechial or livid appearance of the eruptions.

CCCXCVIII. The favourable symptoms, again, are drawn from the state of the voice and respiration, and from the continuance of the swelling of the face and hands, not suddenly disappearing.

CCCXCIX. The fatality is generally on the eighth or eleventh day ; sometimes, though more rarely, it is protracted to the fourteenth.

CCCC. Dissections of this species exhibit the same morbid appearances as attend putrid fever ; for, in general, no pustules seem attached to the internal viscera.

CCCCI. From this view of the disease the matter of small-pox seems an active specific contagion, affecting but once in life, and exciting violent inflammation, which terminates speedily, according to the particular manner of its reception into the body, and the state of constitution either in benign suppuration or gangrene ; but before examining these circumstances of its action, as displayed by inoculation, the treatment of this last species of the disease merits consideration.

CCCCII. The first step then, from the nature of the disease, is the checking the violence of the inflammation ; and, as the action of the cause is determined chiefly to the surface, the repressing of it here, as well as in the former species, forms the leading indication. But when these primary means prove ineffectual, and the inflammation proceeds to its secondary state, other auxiliaries are then to be employed ; and these consist of antiseptics, and such remedies as abate irritation.

CCCCIII. The antiseptic used is principally the bark, and it is best exhibited in a fermenting state, or conjoined with yeast, wine, and acids, either the vitriolic or muriatic, in a dilute state.

CCCCIV. The remedies, again, that abate irritation, are chiefly cold and opium; and the latter should be exhibited from the fifth day, in a regular dose, at bed-time,

Measles (Morbilli).

CCCCV. The measles are a continued inflammatory fever, attended with an eruption in the form of clusters, little prominent, and resembling flea-bites, marked by a vivid redness, gradually decreasing till desquamation ensues.

CCCCVI. The peculiar diagnostics of this fever are the strong catarrhal symptoms, or affection of the eyes, nose, and throat, with an incessant dry cough. The degree of sickness attending varies in different cases.

CCCCVII. This disease, like the small-pox, is properly divided into three stages: the first extends from its accession to the period of eruption, which is commonly the fourth day from the seeming attack; the second, from the eruption to the time of desquamation, which extends from the former period to the eighth day; and the third, from the desquamation till the departure of the disease, or its change into a different affection.

CCCCVIII. During the first and second stages the chief morbid circumstance is the strong catarrhal fever; and, during the last, the attack of a rheumatic affection, or diarrhoea, supervenes.

CCCCIX. The eruption, like that of the small-pox, first appears on the face and neck, in distinct clusters. As it occupies the rest of the body, it thickens into patches, resembling a thick rash; and, when desquamation ensues, it leaves a white dirty scurf upon the skin.

CCCCX. The prognosis in this disease is determined by the pectoral symptoms, which, if fatal, is on the ninth day. But measles are rarely fatal of themselves, but from the consequences, or secondary affections, which are apt to attack the system from the peculiar nature of their infection.

CCCCXI. The matter of measles, then, is a peculiar contagion, affecting but once, and producing strong inflammation, or erysipelatous affection, of the external surface, never tending to suppuration, and very rarely to gangrene.

CCCCXII. The treatment, therefore, consists in counteracting inflammation; but, from the peculiar irritation on the lungs, the application of cold, as in small-pox, would be here improper. A moderate temperature is, on that account, preferred; and the obviating the inflammatory tendency of the morbid cause trusted to venesection, laxatives, and an antiphlogistic course. Though these remedies are indicated in every stage of the disease, they are particularly useful towards the termination, or evanescence, of the eruption; and venesection is looked upon by every practitioner as a hurtful remedy till the eruption is complete.

CCCCXIII. If no natural diarrhoea comes on, which is a critical effort at the termination of the disease, laxatives are particularly indicated, from the peculiar foetor the stools then acquire; and the operation of laxatives is always attended with a certain relief of symptoms, and should be continued so long as dullness and fever remain, till the appetite and spirits return.

CCCCXIV. Emollients, during the progress of the disease, to lessen the irritation on the lungs, are highly proper; and, towards its termination, even an opiate may be employed with the same view. Blisters may be occasionally applied when the pectoral symptoms are urgent.

CCCCXV. Antimonials are highly useful through the whole of the disease, and will supersede the use of laxatives if directed so as to affect the intestines.

CCCCXVI. When the preceding disease has been violent in its attack, where the use of the proper means have been omitted, and its attack at the same time has been upon a weakly scrofulous constitution, morbid consequences then arise more serious in their issue than the disease itself: these are, peripneumony, ophthalmia, consumption, and dropsy.

CCCCXVII. The first of these attends the sudden retrocession, or premature departure, of the eruption; and it either occasions the disease to prove quickly fatal, or it degenerates into consumption.

CCCCXVIII. The second, or ophthalmia, is particularly confined to the eye-lids, which continue for a great length of time sore, swelled, and inflamed. This affection always succeeds an improvident application of cold.

CCCCXIX. The third, or consumption, is also the effect of the same exposure; and the predisposition to this affection is so strong, that every precaution should be used where the smallest tendency to scrofula is discovered in the habit, to avoid it while a child is subjected to the attack of measles.

CCCCXX. The fourth, or dropfy, is rare; and, when it occurs, it is attended with an enlarged mesentery, and shows the existence of the same scrofulous predisposition already remarked.

Chicken-Pox (Varicella).

CCCCXXI. The chicken-pox resembles the small-pox somewhat in its general appearance; but it differs from them in its symptoms, in its progress, and in its duration.

CCCCXXII. With respect to the first, it is preceded by a slight and uncertain fever, never possessing the strong continued form of small-pox.

CCCCXXIII. In regard to its progress, the vesicle, which is smaller than that of small-pox, and distinct, fills all at once, and retains its fluid appearance during the whole period of its duration.

CCCCXXIV. On the third it is observed, that its continuance never exceeds three or four days; a space too short for the duration of small-pox.

CCCCXXV. The matter of chicken-pox, like that of small-pox, is a specific contagion, attacking but once in life, the action of which has neither powers to produce suppuration, nor yet tendency to gangrene, but occasions merely a clear thin liquor to be effused into the vesicle.

CCCCXXVI. From the mildness of the disease, little is necessary in the treatment. A laxative or two is successively repeated on the disappearance of the eruption.

Inoculation.

CCCCXXVII. As the two diseases of small-pox and measles are so violent in their attack in the natural form, one out of every eleven dying from the ravages of small-pox; and as few escape their attack beyond the age of seven or eight years, various attempts have been formed to induce a more favourable form of them by means of inoculation.

CCCCXXVIII. This process we already considered in vol. I. p. 45. and also in vol. II. p. 68. It consists in the introduction of a small quantity of morbid matter through the external surface, so as to affect by its action, in a specific manner, the whole system.

CCCCXXIX. This operation has been practised in

a variety of ways, at different times, and in different countries. What we are here chiefly to consider are, *the proper period of its application, the cause of its mildness, and the circumstances necessary to a security against a future attack.*

CCCCXXX. In regard to the first, from a number of experiments it appears that inoculation succeeds best after the sixth month, and that children often escape the disease when exposed to it previous to that period; but, if left to choice, that the ninth or tenth month is the most favourable time.

CCCCXXXI. With respect to the mildness of the disease from inoculation, it depends on the operation alone; and, in proof of this, matter taken from a confluent small-pox has been found to produce a disease equally mild as that from the distinct kind. This is also verified in inoculation from the plague. The mildness of the disease may be even increased by attention in the performance of the operation; and avoiding, in introducing the lancet, to draw blood.

CCCCXXXII. In the last circumstance, or in order to ensure a remedy against future infection, it is absolutely necessary that the contagion affect the system in general, and show this effect by the presence of some degree of fever, however slight or short in its duration. Without this, the local effect in the inoculated part is not sufficient; and this general influence of the contagion or fever is enough, even though no apparent local change should follow. It is, therefore, the want of this general effect on the system that has occasioned the infection of small-pox to be received in cases where

inoculation, at a former period, has been performed; and, wherever no general eruption follows inoculation, the practitioner should draw his opinion against the risk of future infection more from this general influence or presence of fever than from the apparent local effects in the inoculated part.

CCCCXXXIII. After inoculation, some restriction of diet is proper; and no animal food should be allowed. An occasional laxative may be also interposed; and, when the eruption appears, the same treatment is to be followed as that recommended in the distinct species of small-pox. *Vide* vol. I. p. 42.

CCCCXXXIV. Inoculation for the measles, though it has been practised, is not general; but the same success attends its application as for the small-pox, the operation being here performed by a thread dipped in the blood.

Vaccine Disease.

CCCCXXXV. But, not satisfied with this mildness of the disease which the operation produces, practitioners of late have also joined to it a milder substitute, in the very principle of the infection or contagious virus, by the adoption of the cow-pox, or vaccine matter, for the variolous.

CCCCXXXVI. This matter has already been taken notice of in the former volumes (vol. I. p. 47, and vol. II. p. 69). It arises from a pustule on the udder of a cow, in consequence of infection, said to be received from the diseased heel of a horse.

CCCCXXXVII. The appearance of this pustule is commonly of a palish blue, or rather of a colour somewhat approaching to livid, and is surrounded by an erysipelatous inflammation, which terminates frequently in ulceration, producing fever, and a lessened secretion of milk in the animal.

CCCCXXXVIII. Infection from these pustules is next conveyed to those employed in handling the animal; and this infection appears in the form of inflamed spots, like vesications produced by a burn.

CCCCXXXIX. They are most frequent about the joints of the fingers, and at their extremities. They rise in their progress into a circular form, with their edges more elevated than their centre, and of a colour distantly approaching to blue.

CCCCXL. From this suppuration of the pustules, absorption into the system takes place, and the glands of the axilla swell, attended with quickened pulse, startings, general lassitude, and pains about the loins and limbs; with vomiting, pain of head, and not unfrequently delirium.

CCCCXLI. The duration of these symptoms is from one day to three or four, leaving ulcerations in the primary affected parts, often difficult to heal, and producing sores of a less virulent kind wherever the matter of these primary affected parts touches.

CCCCXLII. No general symptoms of cutaneous eruption attend this complaint, or are very trifling.

CCCCXLIII. The cow-pox affection, then, thus described, forms a certain preventative against the virus of small-pox; and, conveyed by inoculation, produces also a milder disease than inoculation with the virus of this disease.

CCCCXLIV. It is performed in the same manner as with the virus of small-pox, by puncture of the arm; and the symptoms take place much in the usual time. On the seventh or eighth day uneasiness is felt in the axilla; this is succeeded by some chilliness, loss of appetite, and head-ach, and some degree of fever for a night.

CCCCXLV. The matter assumes rather more of a dark hue in the pock than that from small-pox; and there is also more of erysipelatous efflorescence.

CCCCXLVI. Eruptions rarely appear on the skin, but are confined merely to the inoculated part: under certain circumstances they do show themselves, but are generally of a mild nature. The termination, however, is usually easy, as in the other inoculation, particularly, it is said, when the matter is taken from those who have had the disease in its mildest form; and that an increasing mildness of this matter seems progressively to take place.

CCCCXLVII. Though the facts on this disease are at present very numerous; yet a sufficient interval of time has not as yet elapsed completely to ascertain the point of its acting as a preventative against the virus of small-pox. In the enthusiasm of innovation, facts are

often overlooked, considered as solitary, or forming but trifling exceptions to a general conclusion. Some of these at present exist, which have been attempted to be explained away: the cause of the virus itself, from the grease of the horse, is now controverted by Dr. Woodville; and we are afraid the progress of time will contradict many other of the high-prized encomiums on the effects and consequences of the disease.

Scarlet Fever (Scarlatina).

CCCCXLVIII. The scarlet fever, in infancy, is for the most part of the typhoid form, with or without an affection of the throat, and always marked by a rosy efflorescence of the skin.

CCCCXLIX. This disease we formerly considered in a general way, in vol. I. p. 49. It begins with the usual symptoms of languor, debility, pain of head, and hurried circulation. The eyes are particularly affected, with stiffness of the neck, succeeded by affection of the throat; and these symptoms may be considered as being diagnostics of the disease till the efflorescence shows itself, which is on the second or third day generally, first on the face, neck, and breast.

CCCCL. The symptoms of fever at this period considerably increase, particularly the pain of the head, with something of a comatose state. The tongue changes from the usual white appearance of fever to a scarlet red; but, about the fifth day, some remission

appears, and, the eruption decreasing, disappears about the seventh.

CCCCLI. The usual symptoms of lowness and depression that succeed fever are then experienced; and some weeks expire before health is restored.

CCCCLII. In the treatment of this fever the indications formed are, to counteract the general febrile state of the system, and to obviate the local affection of the throat.

CCCCLIII. The first is regulated by the violence of symptoms, and the greater or less tendency discovered to a putrid termination. Whenever the disease is epidemic, the typhoid form constantly exists; and then the bark, wine, and antiseptics, become the chief remedies. The bark is best exhibited in a liquid form, and its tendency to purge counteracted, when necessary, by opium. When, on the contrary, the disease is sporadic, saline draughts and antimonials may be trusted to.

CCCCLIV. The affection of the throat requires, at all times, frequent syringing with mucilaginous gargles, rendered active by acids or other antiseptics, as tincture of myrrh, snake-root, or spirit of ammonia; and the frequency of doing is of great consequence in early infancy.

CCCCLV. When much swelling attends this affection of the throat, blisters, being then indicated, may be applied.

CCCCLVI. The affection of the throat is sometimes known to increase as the efflorescence decays, and even to assume a gangrenous appearance; but this appearance separates without any eschar being thrown off.

CCCCLVII. The disease, on its departure, is frequently succeeded by anasarca; but this, in infants, is very partial, and soon yields to the common means of purging.

CCCCLVIII. The prognosis in this disease, in infancy, is less favourable than in adults; but our opinion must be regulated by the apparent putrescent tendency; for, at this early period of life, a number of children sink under it.

Miliary Fever (Miliaria).

CCCCLIX. The miliary fever is a disease rarely attacking children, unless epidemic; and then it is distinguished by the usual symptoms, as in other cases.

CCCCLX. These symptoms are, fever, with much itching of the skin, and profuse perspiration, which terminates in a measles-like eruption, and remission of symptoms, on the third or fourth day. The eruption, however, varies its appearance in different cases, at times forming small pimples, of a pellucid appearance, called crystallines; and at times appearing in long red spots, resembling the scarlet fever.

CCCCLXI. During the period of eruption the feverish symptoms continue with some violence; and no

proper or continued remission occurs till the eruption begins to dry.

CCCCLXII. The treatment here is similar to that in typhus, of which it partakes. Wine should be exhibited in the form of white-wine whey, or mixed with the food. Cordials, as the confectio aromatica, the camphorated mixture, volatile alkali, compound spirit of vitriolic æther, and even blisters, will be indicated by the degree of debility; and, where real putrescent symptoms appear, the bark may be had recourse to.

CCCCLXIII. The primæ viæ are to be kept clear by rhubarb or glysters, the situation of the child kept cool, and cold acidulated drinks the only beverage allowed.

Contagious Chronic Eruptions.

Scald Head (Tinea).

CCCCLXIV. Tinea consists in a scaly eruption of the skin of the head or hairy scalp. It is attended with various degrees of acrimony, and becomes accordingly more or less infectious in its nature.

CCCCLXV. It arises from an obstruction of the small glands at the roots of the hair, which, passing into ulceration, produce, by the acrimony of their contents, the common form of the disease.

CCCCLXVI. In directing the cure of this affection, its particular extent or progress is to be consi-

dered; and in every case it is to be held that it exists merely as a topical affection, and is to be chiefly removed by topical means.

CCCCCLXVII. When the disease is incipient, simply stimulating the vessels of the part, so as to restore their circulation, will be sufficient; and, for this purpose, the sulphur ointment, with a proportion of $\frac{x}{8}$ or mustard-flour, will answer, rubbed in once or twice a day.

CCCCCLXVIII. When the disease is more general, the head may be first bathed with the saponaceous or tobacco lotion twice a day, and the scabs then anointed with the ointment of nitrated $\frac{x}{8}$.

CCCCCLXIX. When the scurfs, besides being general, are thick and rise high, the head must be first close shaved, then washed with a solution of soap and the pitch ointment, with a proportion of hellebore powder rubbed in warm for a long time; and it is then to be covered with a wax cap. On the hairs separating they are to be removed, when a new growth will take place. The repeated application of blisters will have the same effect.

CCCCCLXX. When the eruption is somewhat of a dry chronic nature, mild alteratives may be exhibited internally, as preparations of sulphur or $\frac{x}{8}$, with the decoction of the woods. When the difficulty lies in the extraction of the hair, the pitch-plaster, or the application of lime, will remove it.

CCCCCLXXI. In most cases of tinea, especially when

extensive, an issue or seton in the nape of the neck is useful.

CCCCLXXII. Simple scurfiness of the head, independent of disease, often takes place from dirtiness; and even without this, at times, as an effect of teething.

CCCCLXXIII. Combing and washing are the only means here necessary; and these may be assisted by anointing the head occasionally with cream when dry; or, if moist, mixed with arquebusade water.

Itch (Psoa, Scabies).

CCCCLXXIV. This disease we already considered in vol. I. p. 221: it is chiefly introduced here to remark some peculiarities in its treatment in infancy.

CCCCLXXV. In no case should the cure ever be trusted to external means without the exhibition of internal remedies. Sulphur and mercurials are the chief means of cure. The true or contagious itch yields readily to the former: when it does not, the disease is more of a mixed or spurious nature, and may then be attacked by mercurials, to which an alterative decoction should be joined.

Shingles (Herpes).

CCCCLXXVI. The herpes, or shingles, is of two kinds; the miliaris, or ring-worm, and the exedens.

CCCCCLXXVII. The former is most common, and described in vol. I. p. 220. It is attended with considerable itching, and is often also of a critical nature, and connected somewhat with a general affection of the system.

CCCCCLXXVIII. From its general appearance, especially on parts exposed, as the hands and face, its removal becomes absolutely necessary, and it generally yields to the use of stimulant and astringent applications, as an infusion of galls, a paste of ink with mustard flour, spirit of wine, saturnine applications in lotion or liniment, white vitriol ointments, or ointments with calcined zinc or nitrated mercury.

CCCCCLXXIX. The second, or more virulent form, is properly a species of ulcer, and is to be treated first with astringent or saponaceous washes, then tried with nitrated mercury in liniment; but, failing the efficacy of these means, the sores may be touched with caustic.

CCCCCLXXX. Alterative decoctions should be employed internally during this local treatment.

Venereal Disease of Infancy (Lues Infantum).

CCCCCLXXXI. The venereal disease of infancy we formerly treated in vol. I. p. 158; but not in the full manner the importance of the subject requires: we all therefore enter upon it here at large.

CCCCLXXXII. The lues of infancy we find generally displays itself first about the genitals and nates; more rarely it attacks the face, breast, and lower extremities. Its appearance in these situations is first in the form of copper-coloured pustules, similar to what distinguish the second stage of the constitutional disease in the adult. These pustules spread, and the body is covered with an appearance from them of what are commonly named *scorbutic spots*. Instead of pustules, however, it is frequently observed in the form of livid blotches. Whichever of these appearances it assumes, it continues to spread about the face, eye-brows, chin, &c. having the same appearance as when recovering from the confluent small-pox. The mouth also comes internally to be affected; and here it displays an appearance similar to aphthæ. These change into sores, and gradually spread backwards to the fauces, and forwards to the lips and nostrils; occasioning stoppage of the nose, difficulty of breathing, and other symptoms attending an impeded action of these parts. The nurse's nipples then begin to turn raw, and to assume the appearance of chancre; and in this way the disease is transmitted from the child. With time, the body of the child becomes wholly covered with ulcerations; but, before arriving at this height, the constitutional disease generally displays itself on the nurse by ulcerations of the throat.

CCCCLXXXIII. The eyes and the ears of the child become also, in the progress of the malady, considerably affected by matter forming in these parts; and in process of time, if the disease is not removed, hectic symptoms coming on prove fatal. The affection of the

eyes is very characteristic of this species of lues, and has been particularly remarked by the physicians of the Venereal Hospital for Children in Paris.

CCCCLXXXIV. The time at which the disease appears in children is most frequently in ten days or a fortnight after birth: and, previous to this, the child is apparently healthy, and the skin clear and smooth. At other times, however, it is coeval with birth, or appears much earlier.

CCCCLXXXV. From this description, the peculiarities that may be remarked in this species of lues are;

1. With respect to its different appearance; and,
2. The mode of infection.

CCCCLXXXVI. The chief circumstances in which it differs from the constitutional disease of the adult are;

1. In showing a specific attraction to the genital parts, independent of the mode of introduction.
2. In displaying no primary action; and,
3. In discovering no tendency at first to affect the throat.

CCCCLXXXVII. The cause of the first of these cannot be explained; and all poisons, we find, possess a specific attraction to particular parts.

CCCCLXXXVIII. With respect to the second, even at times in the adult there is very little primary operation of the virus, as in the lymphatic chancre; and we

find that excess of secretion in parts diminishes the action of the virus on its introduction. In the foetus and in childhood, the activity of the lymphatics is not equal to what is observed afterwards; and the larger vessels possess then more power. Hence we suppose, that from the excess of fluids in the habit of the foetus, and the small activity of the lymphatics, the virus may be introduced without any local effects, till it is determined by receiving a new stimulus from the force of the circulation to the parts it attacks.

CCCCLXXXIX. The third circumstance, or its small tendency to affect the throat at first, may be explained by observing, that though between the genital organs and the throat there prevails a remarkable sympathy, as allowed by all authors, yet this does not take place till the genital organs become fitted for executing their proper offices, as displayed by the changes they receive at the age of puberty. Till the age of puberty, then, there is no particular irritation on these glands to produce this sympathy, while the natural determination of the circulation being to the skin, the disease therefore appears chiefly here.

CCCCXC. The mode of infection in this case is a subject attended with some difficulties; and we consider it as derived either from the male or female.

CCCCXCI. The first of these is perhaps the rarest; but that the semen may be conveyed to the uterus in a vitiated state, by accidental contamination in its passage through the urethra, is not to be doubted. How it afterwards acts, it is impossible to explain; yet the fact

is sufficiently certain, that children are every day born with appearances similar to lues, where no taint ever prevailed in the habit of the mother, and where, therefore, we have reason to suppose the original stamina, at the time of impregnation, received some morbid change.

CCCCXCII. The second mode of infection, or from the female, is by far the most frequent; and it may be communicated here, either,

1. By the virus circulating in the general mass; and determined, without affecting the mother, through the circulation of the placenta, to the child.

2. By contamination in its passage through the vagina at delivery; or,

3. By suckling from an erosion of the nurse's nipple.

CCCCXCIII. The first of these is considered by Mr. Hunter as barely probable; but it is a known fact, that the contagion of small-pox has been conveyed to the fœtus without affecting the parent; and we have reason, therefore, to suppose, that other contagious may be conveyed in a similar way. We admit, at the same time, that it is not a constant effect, as contagions affecting the mother seem also often escaped by the fœtus; yet where the virus exists in the circulation of the parent, from the increased determination to the uterus favouring its deposition, it may be communicated in this way.

CCCCXCIV. From this reasoning, then, we conclude, that where a child is born with symptoms of

lues, as described, or rickets appear soon after birth; or where a woman repeatedly miscarries, without any evident cause, about the sixth or seventh month, and the child is expelled dead or in a putrid state; or if the motion of the child formerly felt ceases at that period, though it is retained for the nine months, being then born in the former state; or, if living, so shrivelled and emaciated in every part as to bear the marks of old age—an appearance strongly remarked by the physicians of the Venereal Hospital for Children at Paris; in all these cases, the infection has either been communicated from the father, or in this way. But as other infections, it was remarked, are not always communicated in this way, though existing in the system of the mother, it is therefore most probably owing to the father; and the removal of infection in him alone is to be considered as the only means of preserving the future offspring, or guarding against those hereditary affections to which they appear subjected.

CCCCXCV. The second mode of infection, or by the vagina in its passage at delivery, is more frequent than the former. It was first taken notice of by Dr. Hunter; who remarked, that the disease did not appear till ten days or a fortnight, for the most part, after birth; in which period the virus had time to be fully introduced into the system. The inactive state in which the virus frequently remains in the vagina strongly favours this opinion: and hence, even where no venereal symptom can be traced in the mother, we find that the foetus often discovers the infection soon after birth; and that, by putting the mother solely on a mercurial course, the disease may in a

future delivery be prevented. Dr. Swediaur has supposed, that in this way alone the venereal disease can be conveyed to the fœtus, if we may make any conclusion from what he delivers; for he has doubted, whether the disease has ever appeared in children at birth. Of this, however, there have been many instances. Wherever, therefore, the child has been born with marks of infection, the mother should not be put on a mercurial course unless she suckles, as the infection is probably derived from the father solely. Where, again, the disease does not appear for some time after birth, or the period mentioned in the history, it is then to be considered as owing to the virus derived from the mother, and a mercurial course recommended to her. It is a matter, indeed, of the utmost importance, to be able to detect to which of the parties the infection of the child is owing, as it is only by this we can be able with certainty to effect a cure. It is often attended with considerable difficulty, and can only be known from the previous history of the patient; but as this, in the case of the female, we can hardly learn, (for delicacy forbids such an inquiry,) we can only judge from the time of appearance, and other circumstances in the infection of the child. On this account, indeed, it will be generally most proper that both parties are put on a course of medicine; and in such situations, as the infection is chiefly communicated by the genitals, particular attention ought to be paid to their state.

CCCCXCVI. The last way in which we mentioned infection can be conveyed to the child, is by means of the nurse; and to determine whether the contagion is received in this way is sometimes pretty difficult. If,

however, the first symptom on the child is the aphthous appearance of the mouth, there is great suspicion of it; for we find, that this affection of the mouth does not occur for some time when the infection is not received from the nipple. And some authors have even alleged, in proof of this, that if mercury is given immediately to the child, on the first marks of the disease, no infection will often be conveyed to the nurse, as the progress of the disease is thus stopped, and the affection of the mouth prevented. The character of the nurse, her connections, and the examining her state of health at the time, will be able to give some farther information, and particularly if her own child has been still-born; or, if alive, whether there are any marks on it of the present disease, or whether the woman suckling it has any affection of her breast. The nipple, also, of the nurse herself, is always here more or less affected, though it is at times so slight as hardly to bear detection; yet, without this, we conceive that the disease could not be communicated, as no matter could be formed to produce the contagion; and we know, that the milk itself is entirely free from the disease. Where, again, the disease is communicated from the child to the nurse, the nipple of the nurse becomes swelled and raw, small vesicles appear on it, which degenerate into chancres; and these are succeeded sometimes by an erysipelatous eruption, similar to herpes, on the breast itself; but more frequently the neighbouring glands of the axilla swell, and the lymphatics are felt from the seat of the infection in the nipple towards it in the form of a straightened cord; and the disease, being thus introduced, soon discovers itself by the same appearances which attend its constitutional operation in

the adult, though it often here displays a virulence uncommon to what is observed where it is first introduced by a primary action on the genital system: and several most lamentable instances are to be met with in different publications of the effects of venereal infection communicated in this way.

CCCCXCVII. Having thus pointed out the circumstances which distinguish this disease in children, and the various ways in which the infection may be conveyed, we proceed, in the last place, to consider the method of cure.

CCCCXCVIII. By many authors, the venereal disease in children has been considered as incurable. This is, however, by no means the case: and those acquainted with practice will find it the reverse; for it yields much more readily to the use of mercury than in the adult. Children, however, are more easily cured before than after weaning; and those born with the disease are more difficult to cure than those who receive the infection at birth, or afterwards from the nurse. It is also to be remarked, that from the calculations of the physicians attending the Venereal Hospital for Children near Paris, it appears that a greater proportion of infected children survive childhood than of healthy children entrusted to the care of common nurses.

CCCCXCIX. In curing the lues of children, there are two ways of exhibiting mercury; either by giving it to the nurse or the child.

D. In giving it to the nurse, we are less sensible of its operation; and, before her fluids are impregnated, there is danger of the child sinking under the disease. From the experiments of the late Dr. Young, it was found even difficult to impregnate the milk; and the cure succeeding in this way he has attributed rather to the mercurial atmosphere in which the child, from sleeping with the nurse, and by being kept constantly in her arms, is confined. This difficulty, however, of impregnating the milk is denied by another author; who observes, that, by evaporating a quantity of it, it generally possesses so much mercury as to bear detection. But as it is often difficult to procure a nurse who will undertake the task of suckling such children; and the mother, if diseased herself, should never be allowed to do it; it has been proposed to impregnate with mercury the milk of other animals, and in this state give it to the child. Thus, in Van Rosenstein's treatise, we find directions for clearing the skin of a goat of its hair, and rubbing it with mercurial ointment, which is to be performed in the same manner as in the common method by frictions; when, its fluids coming to be loaded with the remedy, it will thus be conveyed in an easy and safe manner to the child.

DI. The exhibition of mercury to the child itself is a practice now more generally followed; and as a very slight irritation from it is here sufficient to effect a cure, in order that this irritation may not be too strong, those preparations are to be preferred which have a tendency to pass off by the bowels, by which any excess of irritation is prevented; and, from the quantity of fluids in the infantine state, this evacuation, unless

carried far, is not attended with that debility which follows so remarkably any increased discharges in the adult. Children possess at the same time, though thus susceptible of the slightest irritation, little tendency to salivation; which would show, that the lymphatic system is not in the same state of activity as afterwards. As a proof of the small tendency they possess to salivation, a case used to be mentioned by the late Dr. Young, of Edinburgh, where 12 doses of calomel were given to be used in 12 days; by mistake, however, the whole number was used in 6, and the child was much relieved, though not the smallest symptoms of salivation appeared. In support of what was mentioned, that a very slight irritation will cure the disease in children, we find that the guaiac, and the other woods which in this climate have little effect on the adult, frequently perform a cure here.

DII. The preparations of mercury commonly employed in this case are, the calomel, and Van Swieten's solution. The former of these is generally exhibited in the quantity of a grain every night; and, after six or eight doses, a sensible amendment is perceived. The same dose is then repeated at the distance of every second night; and, in twelve days longer, the disease is commonly removed. Where the solution, again, is employed, thirty drops make a sufficient dose, and it should be given in milk. The same rules are to be observed in continuing it as with the calomel, and the same success may be expected. It is the favourite remedy of Van Rosenstein in the venereal complaints of children; and, wherever given in an increased dose,

it has a tendency, like the calomel, to pass off by stool.

King's Evil (Scrofula).

DIII. Scrofula is very various in its appearance, and extended in its seat. Its primary symptom is the swelling of the lymphatic glands, ending in ulceration: this ulceration extends it to other parts; and, in its progress, the whole of the system appears to take on the morbid state.

DIV. The previous symptoms of this disease are, often, a peculiar look about the eye, and a remarkable thickness of the upper lip; frequently, also, an enlarged belly.

DV. If not originally induced by it, the cause of this malady is often at least brought into action by preceding disease, or that state of debility which preceding disease creates. Hence it is known to follow small-pox and measles, hooping-cough, and teething.

DVI. Scrofula seldom appears before the age of two years; and it also departs, in its external forms, at the age of puberty. The period, therefore, which succeeds teething, and precedes puberty, is the distinguishing æra of its attack.

DVII. The causes of scrofula are still uncertain. Chemistry has detected a fault in the fluids, and

the apparent state of constitution shows equally a debility and laxness of the solids. These faults will naturally be increased by accidental circumstances. Hence we find the disease most prevalent in a cold damp situation, and increased by whatever deprives the body of its due nourishment, or conveys it of an improper kind.

DVIII. The prognosis in scrofula is determined in general by its particular form. The external species are seldom attended with danger, unless the ulcerations are very extensive: the internal forms, again, are generally fatal. The disappearance, also, of the disease, in any particular form, does not secure against a future attack.

DIX. The general treatment is also regulated by the same circumstances.

DX. The swelling in the first stage will frequently yield to local stimulants, as slight mercurial friction, so as to pass through the glands: fumigations, also, with sulphurated mercury, discutients of various kinds, as taken notice of in vol. II. p. 435, particularly a strong solution of camphor in oil. When these means fail, suppuration should then be induced as quickly as possible by a suppurative cataplasm, or a blister, and even electricity to the part, with the use of stimulants internally.

DXI. When ulceration has once taken place, the employment of the tonic plan becomes highly ne-

cessary, occasionally interposing neutral salts, and joining to the internal tonics the use of sea-bathing. This treatment, however, is only suited to the milder forms of the disease, and is farther detailed in vol. I. p. 185, and in vol. II. p. 117 and 149. The particular treatment of internal scrofula requires a more special detail.

Watery Head (Hydrocephalus).

DXII. Hydrocephalus, or the watery head, is a disease peculiar to infancy. It is of two kinds; the external and internal. The former is generally coeval with birth, or precedes it: the latter, however, is most frequent in its occurrence, and generally fatal in its termination.

External.

DXIII. In the external hydrocephalus, the seat of the fluid is the surface of the brain. Such children are often still-born; but it frequently appears immediately after birth, and in this case the treatment should be trusted to a frequent application of blisters, placed so as to affect the different sinuses, especially the longitudinal one, and to promote a discharge from that situation so as to remove the internal accumulation; and life is often protracted till the head acquires a most ponderous and unwieldy size.

DXIV. Though some instances of cure may happen from this plan, the disease is in general fatal.

Internal.

DXV. In the internal hydrocephalus, the deposition of the fluid takes place in the ventricles.

DXVI. This disease is distinguished by pain of head, across the brow, accompanied with nausea, sickness, and other disorder of the animal functions, without any evident cause, and sudden in their attack; variable state of pulse; constant slow fever; and, in the advanced stage of the disease, dilatation of the pupil of the eye, with a tendency to a comatose state.

DXVII. The disease is almost peculiar to children, chiefly to those of a scrofulous habit. Its attacks are seldom known to extend beyond the fourteenth year.

DXVIII. It has been divided into *three* stages, in its progress.

DXIX. The *first* is marked by loss of appetite, and a degree of melancholy and uneasiness, without the child being able to fix on any particular symptom. Pain in the head is next felt, especially above the eyes, and in a direction betwixt the temples. This tense pain gradually extends, and is at last felt more particularly in the arm and leg of one side. The affections of stomach next commence, and alternate with the pain and uneasiness of the head. The febrile symptoms, though pretty constant, are milder in the morning, but suffer always an evening exacerbation. Vomiting occasion-

ally occurs, but costiveness is a leading symptom: the tongue is little affected, except towards the end, when it assumes a scarlet colour, and sometimes becomes aphthous. As the disease advances, all the symptoms of hectic are conspicuous: and, during the whole disease, the child shows a strong propensity to the bed, or a desire to avoid being moved.

DXIX. In the *second* stage, a remarkable alteration takes place in the pulse, which becomes slow and heavy. The disease also is strongly marked by the state of the eyes, and a dilatation of the pupil is observable; sometimes even double vision prevails. The child also screams out without being able to assign a cause, and his sleep is in general disturbed.

DXCI. In the *third* stage, the pulse returns again to the febrile state, becoming uncommonly quick and variable; and convulsive symptoms take place. Though the disease generally proceeds in the manner described, yet sometimes it is sudden in its attack.

DXCII. Our opinion in this disease is always unfavourable; and, wherever recovery has taken place, we have reason to think the physician has been mistaken in the malady. It is most frequent in its attack from two to ten years.

DXCIII. Dissections here show different morbid appearances of the brain; most commonly there is from four to six ounces of serous effusion within it; at other times the organ appears, as it were, gorged with blood; collections, also, of a viscid tenacious matter, have been

found in cysts upon the external surface of the brain, and tumors attached to its substance.

DXXIV. In the treatment of the disease, three indications are formed :

1. To relieve the urgent symptoms, particularly those of the head.
2. To discharge the contained fluid ; and,
3. To restore the habit impaired by the disease when the former are successful.

DXXV. The first is effected by topical bleeding, with leeches applied to the temples, or from the jugular vein ; which may be followed by the use of blisters, or the formation of issues, while the symptoms of sickness and vomiting will be alleviated by the saline julap and absorbents, to which the addition of an opiate may be occasionally made.

DXXVI. The second indication is to be chiefly accomplished by the use of mercury, either in the form of calomel, given in small doses, or by unction applied as near as possible to the seat of the disease, or about the head.

DXXVII. The same has been also attempted by diuretics, though less successfully, as the foxglove, cream of tartar, &c.

DXXVIII. The third consists in the use of tonics, the best of which is the cold bath and the bark.

DXXIX. From the incurable nature of *hydrocephalus*,

its prevention becomes an object of peculiar importance. Hence has been recommended the early introduction of an issue in the head, in all cases of predisposition.

Mesenteric Fever (Febris Mesenterica).

DXXX. Mesenteric fever is most common in its attacks from the age of three or four years. It is irregular in its paroxysms, occasionally remitting, and at other times entirely intermitting. It is attended with loss of appetite, swelled belly, pain of bowels, daily attacking, and alternating with periods of ease, and some days it is entirely absent. The child sensibly falls off; it cannot walk, if formerly able to do it; and inclines to lie much in one posture, from the languor and debility induced; a general flaccidity and paleness of countenance is conspicuous; and, in the progress of the disease, the mesenteric affection becomes visible, by the increased size of belly, its hardness, and pain.

DXXXI. From this period the hectic is constant, and little remission occurs. There prevails much thirst, and a foetid breath. A foetid frothy diarrhoea supervenes, which proves fatal; or the child, without this, is cut off by a gradual wasting, without any strong aggravated symptoms.

DXXXII. This disease rarely occurs after the age of eight or ten; but it is very frequent before this period, and is promoted by all the complaints of childhood, which render active the scrofulous predisposition.

DXXXIII. The treatment of the disease varies somewhat according to its different stages.

DXXXIV. In the first stage, the chief symptoms are flow belly, recurring abdominal pain, and intermittent fever. These symptoms are counteracted by first opening the bowels, and then beginning a course of calomel, in small doses, given every other day, and alternated with neutral salts. On the remission of fever, some light chalybeate, or other tonic, is then to be employed.

DXXXV. The second stage, again, when the abdominal affection is more permanent, is marked by similar emaciation of the extremities, as well as the increased abdominal size, and by a loss of colour and general hectic state. In this state the treatment depends entirely on resolution of the swelling, and which has chiefly been attempted by mercury and steel. Mercury, in this stage, has been often introduced by friction, joined with volatile liniment; and this or calomel is the best form, or else by clyster, as recommended by some writers. At any rate, friction is well adapted as an auxiliary means to the relief of this disease, and should be employed daily, joined with stimulating plasters or oils.

DXXXVI. During the progress of the mercurial course, the occasional interposition of neutral salts should take place; and the mercurial may be also joined with a narcotic, as the cicuta.

DXXXVII. If the symptoms yield to these means,

tonics become then the next resource to obviate the consequences of the preceding affection; and the best with this view are the bark, steel, and cold bathing. Both the bark and steel should be given in a fluid state; the former in decoction, the latter as a chalybeate water.

DXXXVIII. Besides medicine, diet here claims a chief consideration. All coarse diet is pernicious: the lightest and most nutritious should be employed, and all fat and greasy aliments avoided.

Hætic Fever (Hætica).

DXXXIX. Hætic fever may be termed the general and fatal termination of all protracted complaints both in infancy and age: it is, therefore, entirely symptomatic, and can hardly be disjoined from the particular complaints with which it is present and connected.

DXL. In infancy, however, some species of hætic are found to terminate in health, and particularly that from worms or teething. Here recovery frequently takes place beyond the idea of hope, and that so rapidly as to bear no proportion with the preceding period of illness. In forming a prognosis, therefore, on the termination of the infantine disease, much caution is often necessary.

DXLI. For the treatment of hætic, in infancy, the particular nature of the primary disease must be the leading direction. Attention must also be paid to the

particular state of the primæ viæ, to a proper choice of diet, and to such a proportion of exercise as the weakness of the child will allow.

Rickets (Rachitis).

DXLII. Rickets consist in an enlargement of the head anteriorly, and in a swelling of the joints, flattened ribs, protuberant belly, and general emaciation, with a bloated or florid countenance.

DXLIII. This disease we already described in vol. I. p. 183. It is evidently, from its history and the period of its first appearance, the product of refinement, and the effect of that artificial mode of life the progress of civilisation has introduced.

DXLIV. It is found particularly to follow bad management, as exposure to cold and wet, and a weak watery diet. Hence it is more frequent in the lower than in the higher orders of life. Its appearance, also, is often the effect of preceding complaints exhausting the vigour of the constitution; and it is alleged to be the frequent consequence of hereditary diseases in the father, or long-continued venereal complaints.

DXLV. The most frequent period of its attack is from nine months to two years. It is marked by a general falling off of the flesh and strength. The child loses its colour, becomes weak, and dislikes to stir. The enlargement of the bones, the distinguishing fea-

ture of the disease, then commences; and they gradually swell and soften, so that little deposition takes place of their earthy part. This swelling is most remarkable at their joints, and gradually extends to every part of the bony system, if not interrupted by some favourable circumstance in the change of constitution, or in the particular treatment.

DXLVI. With this state of the osseous parts there prevails a quick feeble pulse, an early decay of the teeth, which rot and fall out, and a premature understanding for the age of the child.

DXLVII. Our opinion, as to life, is generally favourable in this disease; for, though the appearances are so unpromising, the disease seldom proves fatal.

DXLVIII. To invigorate the system is certainly the leading indication of cure, and that chiefly by increasing the deposition of earthy matter which seems deficient in the bony system. This is done in three ways:

1. By abstracting the quantity of fluid nourishment as much as possible, by a diet in which a greater proportion of animal food prevails; or else, where vegetable food is used, by employing it in most stimulant forms.

2. By the use of tonics, especially those of an astringent nature, as the chalybeates and bark, premising and alternating their exhibition with an occasional emetic or laxative, of a warm stimulant nature.

3. By the application of the external means of exercise, friction, and cold bathing, all tending to dissipate

the more fluid parts, and to give firmness and consistency to the solids.

DXLIX. The friction should here follow the cold bathing, and be joined with some of the stimulant oils to assist its effect, as the skate oil, which has been highly commended.

DL. In very young children, the cold bathing has been directed to consist merely of dashing the face occasionally with cold water, in a gentle manner, so as to occasion an exertion of its muscles; or to wrap the extremities round with cold clothes, dipped in spirits and water.

DLI. In a certain time, by regimens alone, the disease is recovered; and that often without the use of medicine at all.

Difficulty of Urine, with Mucous Discharge.

(Ischuria Mucosa.)

DLII. A mucous discharge from the bladder, or a species of ischuria, is frequent in infancy, during the period of teething and the progress of different inflammatory affections.

DLIII. This affection is marked by pain in the discharge of urine, a frequent desire to void it, or with pain on the first attempt. The urine itself displays also a morbid state, being either mixed with a thick mucus, or tinged with blood; or it shows small coa-

gula, intermixed with the discharge, that fall to the bottom.

DLIV. This disease is most common to children of a delicate irritable habit. It differs from that of age merely in its being less violent in its symptoms, and therefore admitting more speedy relief.

DLV. This affection, though alarming in appearance, is merely of a temporary nature, and generally yields in a few weeks, on removal of its primary cause.

DLVI. The cure is to be attempted at first by diluents and emollients, in order to lessen the action of the irritating cause, or the urine itself on the organ. When these fail, and the first stage of inflammation is passed, tonics, restringents, balsamics, and alkalies, will be all found effectual, on different occasions, in completing a cure.

DLVII. Should the disease prove recurrent after being once cured, it has been known to yield to the golden rod, in infusion, in moderate doses.

Suppression of Urine (Ischuria Renalis).

DLVIII. Suppression of urine, from impeded secretion, is known to occur, though a rare disease, in infancy; and the want of accumulation, or pain in the lower part of the belly, marks it from this cause.

DLIX. It is preceded by some fever, generally slight, and attended with diarrhœa and vomiting of a bilious nature: a suppression or diminished excretion of urine then comes on, which gradually increases for twenty-four hours, when the child is unexpectedly cut off.

DLX. The cause of this disease appears, by dissection, to be inflammation, and its consequences. The seat of it is found to be the mesentery, from the latter communicating to the kidneys.

DLXI. The treatment must be directed entirely to obviate inflammation, by the application of leeches to the belly, a blister to the sacrum, and the repeated use of the warm bath, with occasional laxatives and diuretics of a cooling nature interposed. In spite of these means, however, the disease will prove generally fatal.

Stone (Calculus).

DLXII. The stone is a disease particularly common to infancy, more so even than to adults. In the form of gravel, the symptoms are generally slight, and yield to some gentle emollient laxative, to dilution, or to some mild alkali.

DLXIII. If much pain should attend this complaint, the warm bath or an opiate will be then proper, though they are seldom required. For more information on this disease, *vide* vol. II. p. 304.

Incontinence of Urine.

DLXIV. This is feldom, in infancy, a primary disease; but a consequence of some other, as an affection of the bladder or spine. It is at times attended with violent gonorrhœa.

DLXV. One species of it, however, requires to be noticed, which takes place only in sleep. This often continues for years during the growing state, but is generally removed before the period of manhood.

DLXVI. The general treatment of this disorder must be regulated by its cause.

DLXVII. In the acute species of it, blisters to the sacrum, and the use of tincture of cantharides in some soft emulsion, will often succeed; or astringents, as the catechu, bark, G. Kino, white vitriol, and some of the balsams.

DLXVIII. In the chronic species, abstinence from fluid diet at night, dashing the parts with cold water, and the use of the cold bath, are in general the best temporary means.

Excessive Thirst (Polydipsia).

DLXIX. Polydipsia, or excessive thirst, has occurred in some few instances as an idiopathic disease of infancy.

DLXX. It is attended with a discharge of urine equal to the excess of fluid drank; and the urine is of the same pale watery appearance as when the fluid is received.

DLXXI. This complaint is marked by no peculiar symptom, except lassitude of the extremities. It ends, however, at times, in glandular affections, and atrophy.

DLXXII. During its continuance, the appetite is little impaired; but the withholding the fluids is attended with a nervous affection, rising at times to the height of convulsion.

DLXXIII. In adults the same disease has been known to succeed fevers, and to continue for life.

DLXXIV. Little satisfactory can be offered respecting the treatment. A morbid state, connected with weakness, in cases of adult polydipsia, evidently exists: whether, therefore, tonics may be employed, or opening the skin, or any other secretion that may be diminished, experience can only determine.

DLXXV. In infancy, the cure will perhaps be best trusted to time.

Inflamed Eyes (Ophthalmia).

DLXXVI. Children, at birth, are very subject to ophthalmia, which varies in its degree, obstinacy, and ex-

tent. From the appearance of the discharge, three species of it are noticed, viz. the blood-shot, watery, and purulent.

DLXXVII. The first is of little consequence, as well as a slight inflammation appearing for the three or four first days after birth. The use of a gentle astringent wash, and additional heat by a flannel cap, is sufficient to remove it.

DLXXVIII. The second, or the proper ophthalmia, is marked by general inflammation of the eye as in adults, a thin acrid discharge, and incapacity to bear the light.

DLXXIX. Its progress is various, and its duration uncertain. On getting well, it is liable suddenly to recur, without any evident cause. It is relieved by diarrhoea, and seems often to alternate with affections of the bowels. When attended with much obstinacy and frequent recurrence, it seems connected with a scrofulous disposition.

DLXXX. In its treatment, the common means of obviating inflammation are to be applied; and if not yielding to gentle astringent washes, with attention to the state of the bowels, the application of a leech to the temple, or a blister on the back, will remove the height of the inflammation. When frequently recurring, and becoming somewhat of a chronic nature, an astringent or mercurial liniment, inserted every night betwixt the angles of the eye, will cure it.

DLXXXI. It is more the recurrence of the disease than the present obstinacy of the fit that renders this affection so troublesome.

DLXXXII. The third, or purulent species, is a more serious disease, and is chiefly distinguished by the extent of swelling and the discharge.

DLXXXIII. The period of its appearance is either immediately at birth, or a few days after. No apparent cause precedes it, and it proceeds with rapidity either to destroy the eye entirely, or to impair the sight of it.

DLXXXIV. The treatment here depends on the most active means of obviating inflammation that the infantine state admits, by a loose belly, the application of a leech, and even scarification of conjunctiva in certain cases, and the application of blisters to the back, nape of the neck, or behind the ears, which are to be kept open; in the last situation, as a perpetual drain. The eyelids themselves should be prevented from adhering, by inserting some greasy matter occasionally betwixt them; and at night Goulard's ointment should be applied, with an astringent poultice above, or compresses dipped in an astringent solution.

DLXXXV. The extent of these first means must be regulated by circumstances of the age and apparent strength of constitution. When complete relief is not received from them, they must give place in the progress of the disorder, or as it passes into a chronic

state, to stimulating applications, in the form of wash and ointment.

DLXXXVI. The best of the former is the aqua camphorata, in the proportion ʒi. to ʒii. of fluid, used by injecting a few drops frequently into the eyes, or washing the lids with it. The same may be done with the tinct. opii, diluted in the same way.

DLXXXVII. The principal form of ointment here is the nitrated mercury, which may be lowered in strength, and applied at night to the lids.

DLXXXVIII. The progress of this complaint occasions various degrees of derangement in the structure of the eye, from simple thickening of parts to a total obliteration.

DLXXXIX. In many instances, though not always, this affection is found to partake of a venereal nature, as described under that disease, p. 121; and, in these cases, the inflammation would seem equally active as that which has been known to succeed retropulsed gonorrhœa. When, from its obstinacy, this cause is suspected, and no other venereal symptom attends to elucidate it, small doses of calomel may be exhibited; or the sarfa in powder, given in pap, or Ward's white drop, or a solution of corrosive. If these remedies give relief, there can then be no doubt of its cause.

Film or Speck (Leucoma).

DXC. This disease has been treated at large elsewhere (vol. II. p. 189). In children, as in adults, it is most frequent in a scrofulous constitution; and arises as a consequence of effusion during the progress of inflammation.

DXCI. At this time of life it is more ready to yield to the application of remedies; and various stimulants, cautiously employed and persevered in for some months, have at last effected a cure. The remedies are, the aqua cupri ammon. in a drop or two, injected twice or thrice a day; the corrosive solution, or the nitrated ointment. The great point in their use is to regulate the extent of the inflammation.

Cataract (Cataracta).

DXCII. Cataract and gutta serena are not infant diseases; they may, however, occur, under peculiar circumstances, as congenite disorders; and their consideration is therefore necessary here.

DXCIII. If at all curable by the power of medicine, which is only at this period of life admissible, the age of the patient, as being most favourable, sanctions the attempt.

DXCIV. The cure of cataract here is chiefly to be attempted by applications to the part. The calomel

and cicuta, and the other narcotic internal remedies, are not so properly admissible.

DXCV. The applications for this purpose are such as produce a proper action or stimulus on the vessels of the part; and this either by simple mechanical brushing or exciting them, as by a smooth brush applied several times in the day, or by producing transient inflammation of the part for the same purpose. This is effected by diluted æther by itself, or combined with the corrosive solution or oil of amber, the steams of oil of turpentine, &c.

DXCVI. To be effectual, much nicety is requisite in the extent of their application, and experience of the time during which it ought to be continued.

DXCVII. In the gutta serena, nothing is to be done: both electricity, which has removed it in adults, and also errhines, are equally inadmissible here. When the child is a few years advanced, such means may then have a trial; and the sooner it can be safely done, and while the system retains the irritability of childhood, the more powerful the application of any remedy may be expected.

Stye.

DXCVIII. Stye is a small inflamed tumour generally of the under lid of the eye, and towards the nose side. It is the consequence of cold, and tends to supuration; but it is slow in its progress, and, where not complete, it is successively repeated till the eye-lid or gland is destroyed. To terminate the disease, on a sup-

puration taking place, the eye-lid may be gently touched with caustic, or a ligature, if admissible, passed towards its base, to separate the diseased part.

Deafness.

DXCIX. Deafness is a common complaint with children, and arises from three causes :

1. Cold.
2. Induration, of the secretion of the ear, or its deficiency ; and,
3. Diseased state of the auditory nerve.

DC. In the first case it is merely temporary, and continues only for a few days. But at times some degree of inflammation or thickening of the membrane attends, when confinement, warmth to the part, and the use of laxatives, are requisite. In obstinate cases, however, it does not always yield to these simple means, and time is often the only resource.

DCI. In the second case, or where induration of the secretion prevails, its removal by a syringe must first take place ; and, when removed, the parts must be defended by warmth and emollients, as a little warm oil of almonds, or cotton, inserted into the ear ; and, where these means are not sufficient, more stimulant remedies must be employed.

DCII. Where deficient secretion prevails, which is known by the apparent dryness of the part, it is to be obviated by either an artificial supply, or stimulating the vessels to produce a natural supply.

DCIII. The first depends on the soap liniment, dropped into the ear, or a little oil of almonds and æther.

DCIV. The second, or stimulating the vessels, is effected either by inserting the juice of onion or a roasted or raw clove of garlic, covering carefully the part from the external air by adhesive plaster, or by the application of a blister behind the ear, or the use of electricity either through the meatus auditorius externus, or the Eustachian tube.

DCV. In the third case, or a diseased state of the nerve, little is to be done; but the use of electricity, errhines, and sea-bathing, may be tried.

Canker.

DCVI. Canker of the mouth consists in small sores affecting the mouth, the inside of the lips, or the gums. It occurs at three periods: either after birth, when it forms a species of aphthæ (as in p. 39); or during the time of teething, when it arises from the irritation of the protruding teeth; or at the age of six or seven years, when the first set of teeth are changing; and it is at this time the worst species of the disease appears, the whole gum dissolving into foul sores. It is considered as prevailing in some countries more than in others. It is a trifling complaint, unless when combined with poverty and improper nutriment.

DCVII. The treatment of this complaint consists in

the use of local astringents and attention to the primæ viæ, with the removal of the cause of irritation when in our power.

DCVIII. Thus, if arising from dentition, the eruption of the teeth will relieve it; and, if from decayed stumps, their extraction will be successful, when the use of local astringents will complete the cure.

DCIX. When a putrescent tendency seems to advance in spite of these means, the bark and mineral acids will be proper.

Gangrene of the Cheek.

DCX. This disease is preceded by the appearance of a black spot on the cheek or lip, ushered in with some degree of rigor or cold fit. This spot spreads fast, and the parts dissolve into ulceration without apparent marks of inflammation.

DCXI. Its progress extends, and the whole side of the face, even the lip itself, comes to be eaten away, so that the jaw-bone and inside of the mouth are laid bare. Towards its termination, the lower jaw falls down on the breast, the affected part of the face is dissolved into a putrid mass; and, the usual symptoms of colliquation coming on in a putrid diarrhœa, the child is cut off.

DCXII. In the treatment of this complaint, which is by no means frequent, antiseptics form the chief remedies for a cure.

DCXIII. The saline draughts in the act of effervescence, and the muriatic acid diluted in some astringent or antiseptic infusion, have been found most successful, joined to a nourishing diet, and the use of wine.

DCXIV. The same applications must be made locally, in the form of lotion and liniment, to the ulcerated parts.

DCXV. During the progress of the cure, the occasional use of laxatives, as indicated, will be proper.

Swelling of Breasts.

DCXVI. We formerly noticed the affection of this kind peculiar to infants immediately after birth, p. 14. The same occurs in female children as the breasts begin to enlarge and expand, when they become painful, hard, and swelled. The situation of the hardness is chiefly the bottom of the breast, which is sometimes loose, at other times fixed: from this part severe darting pains are felt. It is often confined to one breast; or, leaving one, it seizes the other. It occurs most frequently, also, in scrofulous constitutions.

DCXVII. The treatment here consists chiefly in giving time till the proper uterine discharge take place, with which the turgescence here is connected. The symptoms, in the mean time, may be alleviated by the use of emollients; but no danger attends the complaint, and its continuance will be productive of no injury.

Abscess of the lower Belly (Tumor Hypochondrii).

DCXVIII. Abscess of the lower belly frequently occurs as a consequence of injury in the infantine state. It is marked by the appearance of tumor in the *regio pubis*, attended with much tenderness and pain on pressure; and it is generally preceded by alvine complaints, particularly *cholera*.

DCXIX. The treatment here consists entirely in obviating inflammation, and effecting a termination of the disease by resolution. The antiphlogistic plan is therefore to be employed; and leeches, blisters, and fomentations, applied to the part. The bowels are to be opened by emollient laxatives and glysters, and pain and fever abated by opiates and diaphoretics. When a tendency to suppuration takes place, this process is then to be hastened by the common poultice; and the matter, being once formed, is to be discharged as quickly as possible, without waiting the external prominence and discoloration necessary in common abscesses.

DCXX. The after-treatment consists in the continuance of the common poultice, the use of gentle laxatives, and a light nourishing diet.

Lumbar Abscess.

DCXXI. Lumbar abscess we already considered in vol. II. p. 136. Though most common to the adult,

it occasionally appears in infancy, and is then the effect of injury, and connected for the most part with a scrofulous habit.

DCXXII. The first symptoms are, a slight lameness and shortening of one leg, with a sense of weakness in the loins. This changes to acute pain and tension, striking down the thighs, with considerable heat and general fever. A tumor, at last, forms externally, either at the groin or side of the anus, without any external inflammation or change of colour.

DCXXIII. The chief point here is, to procure resolution in the early stage; but this is generally passed before the cause is suspected. Resolution, however, may be attempted by the common means of topical bleeding, with leeches or cupping; of blisters or issues; of emetics, so as to give a contrary determination to the impulse of the fluids; of the warm bath, of caustics, and electricity.

DCXXIV. Should hectic symptoms have already taken place, and this primary stage be passed, the discharge of the matter forms then the only resource, as directed in vol. II. p. 138.

DCXXV. The matter being fully discharged in the manner and with the precautions there taken notice of, the recovery is to be trusted to a nourishing diet and tonics, particularly the bark, steel, and acids.

White Swelling.

DCXXVI. This is a scrofulous affection, peculiar to infancy, or at least more frequent during this period. It is fully treated in vol. II. p. 156, and nothing additional occurs to be offered here.

Curved Spine and Palsy of the Lower Extremities.

DCXXVII. This affection is most commonly the consequence of previous injury, as well in adults as infants, though often overlooked, at the time, till the morbid effects make their appearance.

DCXXVIII. The seat of this injury varies, being either the neck, back, or upper part of the loins. Its first symptoms in children are irregular twitchings in the muscles of the thighs, succeeded by dislike to motion. An incapacity to move next takes place; along with it the extremities lose much of their sensibility. This incapacity prevails in various degrees; but the use of the extremities, in time, comes to be totally lost, and a remarkable rigidity of the ankles is at the same time conspicuous.

DCXXIX. To prevent the progress of this affection, or remedy it entirely when it has occurred, the chief means found successful are the formation of a drain contiguous to or on each side of the seat of the injury, and

the giving the parts above the injury such support as may relieve the seat of the disease.

DCXXX. The first is done by the insertion of a seton in each side, or in forming an issue with the knife rather than the caustic, as described in vol. II. p. 107 and 368. This drain is to be continued till some time after the disappearance of the disease, and is then to be gradually allowed to dry up.

DCXXXI. The second is answered by the use of different machines, invented by different artists for the purpose, and worn during the existence of the affection.

DCXXXII. These means are to be further assisted by the use of friction, cold bathing, and tonics; but the insertion of the issue is the first and leading principle of treatment.

Simple Debility of Lower Extremities.

DCXXXIII. This is a complaint not very frequent. It is the effect of preceding disease, but it shows no marks, during its continuance, of being complicated with any other affection. The only symptom is the *debility itself*, gradually increasing, till, in four or five weeks from its commencement, the use of the limbs is entirely lost.

DCXXXIV. The indications of cure are to restore

energy to the parts, and give them support during the continuance of the disease.

DCXXXV. The first is done by blisters and caustics to the sacrum, and stimulant applications to the legs and thighs.

DCXXXVI. The second consists in the use of irons, to support the legs, and enable the patient to walk. These irons must be worn till after recovery takes place.

Debility, with Discoloration.

DCXXXVII. This differs from the former in being, apparently, a general affection of the system. The children become weakly, and drag their legs after them; the head enlarges, the limbs become emaciated, and over the whole there appears a deep leaden blue colour.

DCXXXVIII. The operation of no external cause seems evident in producing this morbid state.

DCXXXIX. The only means of relief pointed out by the symptoms are cordials and tonics, a generous diet, the bark, after opening the primæ viæ, tepid sea-bathing, which is preferable to cold, and the application of friction and warm embrocations to the surface.

Curvature of Bones without Injury.

DCXL. This state of the bones, the effect of rickets and other diseases, requires a separate consideration in regard to its particular treatment. The treatment, in all cases, is the giving support by machines, till the curvature is taken off; and, till this curvature is taken off, no means of strengthening the system, so as to preserve the bones in their improper shape, should be used. Hence the impropriety of cold bathing till this end be effected.

Whitlow (Paronychia).

DCXLI. This affection we already considered in vol. II. p. 136. In a mild, or superficial form, it is liable to repeat its attacks frequently in young persons: its prevention, therefore, becomes an object of attention; and this is chiefly effected by frequent bathing of the part in an astringent anodyne solution, so soon as the first symptoms of attack are felt.

Boil, or Inflammatory Tumor (Furunculus).

DCXLII. Boils, in different parts, are a frequent affection towards the age of puberty. They are generally considered of a salutary tendency, and readily yield to

a common poultice and slight suppurant applications. A purge or two commonly succeeds their healing.

Chilblains.

DCXLIII. Chilblains we already considered in vol. II. p. 141; little, therefore, occurs to be added here. As they are entirely the effect of extreme cold, in their treatment a gradual change in the temperature of the part should only be permitted; hence the propriety of the first applications being ice, snow, solutions of salt, &c. Where the child is predisposed to this affection, oiled silk should be worn on the part, and this covered with a proper defence of leather, as the best preventative.

Burns.

DCXLIV. Infants are equally exposed to this accident as adults, and in them the tendency, from the excess of inflammation attending it, to gangrene, is greater. Nothing, however, can be added to the observations detailed in vol. II. p. 62, on this subject.

DCXLV. In slight cases, the use of astringent solutions will soon complete a cure; as, diluted brandy, or other spirit, ink, wine, saturnine lotions, &c.

DCXLVI. In ulcerated cases, the frequent renewal of ice, or a lotion of lime-water, the saturnine lotion and brandy, or a strong solution of soap, or a liniment of

olive oil, cold water, and ley, afterwards dressing with linseed oil or Turner's cerate, will be equally effectual.

External Injuries of Bones.

DCXLVII. Such accidents are apt to occur both during the progress of birth, and also at any period of infancy. They are divided into two kinds, Luxations and Fractures.

DCXLVIII. The two situations of the first are the shoulder, and perhaps lower jaw.

DCXLIX. The shoulder, in children, so soon as it is known, is easily reduced; and little else is necessary, in the after treatment, than keeping the part from motion.

DCL. The lower jaw, when dislocated, will give an awkward appearance, and also prevent the child receiving any nourishment till reduced. This is done in the manner described in vol. II. p. 356; and the after treatment requires to avoid exertion of the parts, as much as possible, for some time.

DCLI. Fractures, the other species of injury, are confined to the collar-bone, the arm, and the leg.

DCLII. The collar-bone is treated by drawing the shoulders back, by their confinement in that posture by pinning them to the clothes, and by the application of

a piece of adhesive plaister, spread on leather, over the injured part.

DCLIII. Fracture of the arm is treated by a proper apposition of the ends of the bone to each other, as in the adult, and then retaining them in that situation. But in infancy this must be done without much tightness; and, for this purpose, three splints may be formed out of linen, repeatedly folded, perhaps five or six times, each half an inch wide, and one inch and a half long; and, being soaked in flour and white of egg, before their application, they will acquire sufficient firmness to secure the position of the part. They should be applied next the skin, and at first wet, so that, on drying, they will be accommodated to the shape of the member. Over them a flannel roller is to be applied, rather loosely, and the confinement of the arm trusted to pinning it close to the side, by strong pins, to the child's gown, which will best secure it. It need only be opened in ten or twelve days, and will be completely cured within the month.

DCLIV. Fracture of the leg is treated in the same manner as fracture of the arm.

Morbid Adhesion of Tongue.

DCLV. An undue extension of the frænum beyond its proper limits, pinning down the tongue, as it were, occasionally occurs, but not so frequently as the operation for its removal is called for.

DCLVI. The manner of performing the operation we already described in vol. II. p. 252. When much called for, it may be performed, though not strictly necessary; at the same time, some caution is required in doing it, and even fatal accidents have arisen in consequence.

DCLVII. The accidents from this cause are swallowing of the tongue and hæmorrhage.

DCLVIII. Swallowing of the tongue is known by the usual symptoms of suffocation. The child suffers much agitation: the attack is sudden. The face turns black; and convulsion, unless sleep is obtained, soon takes place, and proves fatal.

DCLIX. The treatment consists in restoring the tongue to its place, and applying the child to the breast; and, when sucking is over, attention is to be paid to the state of the hæmorrhage; for it is the feeling the hæmorrhage that tempts the child, by sucking, to swallow the tongue.

DCLX. The hæmorrhage, if considerable, is best stopped by an instrument in the shape of a fork, the prongs of which are so placed as to press on the sublingual veins, and the other end of it against the lower jaw. This instrument is the invention of Mr. Petit. Such accidents seldom attend the operation when necessary at present.

Hiccough.

DCLXI. Hiccough forms a mild species of convulsion, to which infancy and childhood are much subjected.

DCLXII. It arises, in infancy, either from over distension or predominant acidity. In the first case the cause soon ceases; in the other it is generally connected with abdominal complaints, and yields to the use of absorbents or external stimulants.

DCLXIII. In childhood, again, where more habitual and permanent, it will give way, as arising from simple irritability, to the use of the citric acid or vinegar, or any powerful suspension of the feeling at the time, in the way of surprise or alarm; though the employment of this last means requires some caution.

Bleeding at the Nose (Epistaxis).

DCLXIV. This complaint is generally symptomatic, till the age of puberty.

DCLXV. In the acute diseases of children it is reckoned a favourable symptom, and generally gives relief.

DCLXVI. When accidentally occurring at other times, from over exertion on the part of the child, it

will prove equally salutary; but, wherever it is over profuse, and the common medicines fail, it is to be treated as directed in vol. I. p. 51, or in vol. II. p. 215; though the latter will never, in children, be necessary.

Affections of Navel.

Hæmorrhage.

DCLXVII. Bleeding, or a rawness, is apt to arise on the separation of the cord. It is the effect of a soft fungus, preventing the skin stretching, as usual, over the mouths of the vessels.

DCLXVIII. This hæmorrhage is often considerable, and frequently returns, so as to affect, in the end, the health of the child.

DCLXIX. The situation of the vessels admits neither the use of caustic nor a ligature. It must be trusted, therefore, entirely to compression.

DCLXX. This compression is best made by a compress, or else doffel, of lint, applied over the bleeding part, and secured by sticking-plaster and a bandage, or the sticking-plaster alone may be applied, as directed, to relieve the umbilical hernia.

DCLXXI. Hæmorrhage, too, is also apt to arise in consequence of a weak or dissolved state of solid, after the cord is entirely healed. In this case it will yield to the use of styptics and compression.

Ulceration of Navel.

DCLXXII. Besides hæmorrhage, the navel is subject to ulceration, from the improper separation of the cord. This state generally yields to the common remedies: a bit of singed cloth, the application of absorbents, or a toasted raisin; and, when more severe, the use of a cabbage-leaf will effect the re-union.

DCLXXIII. But in many cases, after it is entirely healed, this part is apt to excoriate, and pass into ulceration. It is then attended with much thin discharge, which disappears and returns irregularly, together with a raw look of the part, which is not many days in this state, but continues to spread. This complaint is particularly connected with the state of the primæ viæ, and an attention to it forms one of the leading indications in the cure. The part itself should be touched with some caustic, as the argentum nitratum, or blue vi-riol; or some absorbent, as the chalk, or lapis calami-naris, and then covered with a common, or a saturnine poultice, or cabbage-leaves. It generally yields to this treatment in the course of five or six weeks.

DCLXXIV. But a peculiar species of ulceration, different from this, and more extensive in its nature, remains to be described. This ulceration is the consequence of preceding disease, and of course of a certain debility induced by it. It arises in the part, though formerly completely healed, and often at the distance

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of five or six months, and spreads over a great part of the abdomen, tending, in its progress, to gangrene.

DCLXXV. The indications pointed out for its cure are, a powerful use of cordials and antiseptics, as the bark, wine, and acids, in every form, both internal and external; but, in spite of these means, the disease is generally fatal, and but few cases of recovery have hitherto occurred.

Imperfect Separation of the Cord.

DCLXXVI. By this is meant, where the cord separates at the place of the ligature, and does not shrink sufficiently near the umbilicus. Wherever this, which is very rare, occurs, as part of the cord may be said still to exist, and to convey a disagreeable appearance, a new ligature is to be put on this remaining part, so as to make it shrink close to the navel, as it ought.

Swelling of the Prepuce.

DCLXXVII. This complaint, when not the effect of inflammation or irritation, from stone, is properly an anasarca, or dropy of the part.

DCLXXVIII. It is preceded by a copious discharge of a soft soapy matter from the surface, which goes away with the swelling.

DCLXXIX. The treatment consists in antiphlogistic fomentations, or poultices, or else slight scarifications of the part, to which means it generally yields.

Falling down of the Gut (Prolapsus Ani.)



DCLXXX. This complaint we examined in vol. II. p. 327, as occurring in the adult. In infancy it is the effect of debility or irritation; and, in order to its treatment, the cause must be removed to which it is owing.

DCLXXXI. It is then easily cured by astringent lotions, as compresses, dipt in wine, applied to the part, saturnine applications, made in the same manner, &c.; or, when the disease is of long standing, injections may be made into the anus, as a decoction of oak-bark and alum, &c.

DCLXXXII. Where the prolapsus cannot be easily returned, on account of inflammation and swelling, a saturnine injection, with a proportion of laudanum, should first be made, and then the reduction attempted, when the anodyne begins to take effect.

DCLXXXIII. Children with this complaint should sit hard, and their feet not touch the ground; and, when they walk abroad much, the part should be supported by a suspensory.

Discharge from the Vagina.

DCLXXXIV. The nature of these discharges preceding puberty, is various, being either bloody, mucous, or purulent.

DCLXXXV. The first of these appears a few days after birth, and is of no consequence, nor requires any particular treatment.

DCLXXXVI. The second, or the mucous, shows itself at the age of five or six, in considerable quantity, often resembling the fluor albus, and is tinged with blood. It readily yields to the bark and the balsam capivi.

DCLXXXVII. The third, or the purulent, occurs in children of three or four years old. It also occurs, accidentally, later, and is then more foetid in its appearance, and of a suspicious nature, to those unacquainted with the real disease; and, in forming a judgment at this period of life, much caution is necessary, not to be led away by rash and unjust suspicions. The disease readily yields to saturnine applications, in the form of lotion and ointment, and that in the course of eight or ten days. Wherever it is obstinate, it will yield to a short use of saline φ , in the form of the corrosive solution, or Ward's white drops, or to the bark, and some of the balsams.

Contaminated Wounds.

DCLXXXVIII. This subject we formerly treated in vol. II. p. 65. Children are particularly exposed, from the delicacy of their skins, to the bites of small animals or insects, and domestic applications, therefore, should always be at hand to relieve them.

The common applications are mixtures of spirits, vinegar, and oil; or of camphorated spirit, vinegar, and laudanum; or what is preferable, if it can be got, is ice, applied for half an hour at a time to the part, and repeated every three or four hours.

For the bites of the viper and other large animals, the remedies of olive oil, eau de luce, and volatile alkali, are well known.

Congenite Diseases.

DCLXXXIX. Congenite diseases are such as are coeval with or precede birth; and they consist of either the deficiency, redundance, or imperfection, of parts.

DCXC. The first of these affections is a deranged circulation or imperfect change; by the foetal state, in this respect, partly continuing. This peculiarity consists either in a stricture of some part of the pulmonary artery, or in the communication remaining open either between the septum cordis, or that at the foramen ovale, or canalis arteriosus.

DCXCI. The symptoms of this affection are, a discolouration of the face and neck, with a dark blue or leaden colour of the lips. The period of their appearance is soon after birth ; and they continue to increase, attended with difficult respiration on motion ; neither are the symptoms relieved by any means employed but confinement to one posture.

DCXCII. The causes of this disease depend on either mal-conformation, or deficient strength in the powers of the system to complete the natal circulation. The period when these changes should take place is certainly from the first moment of birth at least : if we judge from the morbid effects that the want of completion of the natal circulation shows, it must be in a very short time.

DCXCIII. The prognosis to be formed in such affections is always unfavourable ; though the exact period of it varies in different cases.

DCXCIV. Nothing can be attempted in the way of treatment but to avoid whatever hurries the circulation ; and every attempt, therefore, at sudden motion, should be strictly guarded against.

Deficiency of Cranium.

DCXCV. Various instances of this affection appear, and form, therefore, various degrees of monstrosity, which are incompatible with the continuance of life.

The most common species, however, is a defect of the cranial bones, at the fontanelle or suture, termed by some authors hernia of the brain, from the protrusion formed of the brain at these parts.

DCXCVI. In this species the child continues to live. Its appearance is that of a round tumor, of various size, seldom exceeding a small egg, without fluctuation or discoloured skin, and attended with some degree of pulsation correspondent to the synchronism of the brain, of which it forms a part, with the pulse. It disappears or yields greatly to pressure.

DCXCVII. It is chiefly by its want of fluctuation, by the effect of pressure, and by its pulsation, that it is distinguished from other tumors in this situation.

DCXCVIII. When once ascertained, its cure is easily effected, which consists in a gradual application of compression. This is done by means of a piece of thin perforated lead attached to the child's cap; and, in making the compression, attention must be paid not to excite pain or disturb any of the functions. By this gradual procedure the tumor will disappear or retire within the cranium, and the void space be elongated by the progress of growth, so as to close up the cavity from which it protruded.

DCXCIX. But tumors of an external species are more common in this situation than protrusions of the brain; and arise from two causes, compression and mal-conformation.

Partial.

DCC. The first to be noticed is one conspicuous at birth on the cranium, resembling in size an egg, and of a round form, with the skin discoloured.

DCCI. It most frequently appears in the case of a first child. Its duration is various, and depends much on the proper application of remedies to reduce it.

DCCII. The treatment consists in the use of astringents, compression, or puncture, each of which is proper under various circumstances.

DCCIII. The first are commonly applied immediately after birth, and consist of fomentations of warm red wine or diluted brandy and vinegar; and, if these means prove successful, they commonly subside in a few days.

DCCIV. The second, or compression, is made with a piece of thin packing-box lead, folded up in linen, and kept constantly on the part.

DCCV. The third is only to be attempted where the former means fail, when the swelling daily increases from the increasing accumulation of its contents; and when opened, and the bloody collection discharged, it will then yield to the first mode of treatment, or the use of astringents.

General.

DCCVI. Another species of this tumor occurs to be mentioned, more extensive, less elevated, and without discolouration. It often occupies a third part of the scalp, succeeds the easiest labours, and arises from some rupture of serous, not red vessels. It generally subsides in the course of the month by the absorption of its contents, and often in so rapid a manner that its diminution is daily visible.

DCCVII. To assist this absorption, when slow, the action of the vessels may be excited by warm embrocations with vinegar, sal ammoniac, or camphorated spirits. Compression may also be employed, and promoting some discharge by the intestines.

DCCVIII. Of tumors from mal-conformation, the most frequent that occurs is what has been termed the spina bifida.

DCCIX. Such tumors possess a sensible fluctuation, contain a lymphatic matter, and are formed by a part of the medullary membrane.

DCCX. Their situation is always in some part of the spine; most commonly the lower part of the neck or upper part of the sacrum.

DCCXI. Their appearance varies at birth, either according as they have been previously ruptured, or as they remain entire.

DCCXII. In the first case it forms an ulcer, marked by a prominent edge and depressed centre.

DCCXIII. In the second case it exhibits a tumor of various size, from that of a pea to half a crown, more or less elevated, exceedingly thin and transparent above, and red and livid below. The surface feels soft, and its fluid retires on pressure. The edges of the spine may also be found round its margin. In other cases it forms a hard thick fleshy substance, producing convulsions when much pressure is applied to it.

DCCXIV. This affection depends on an imperfect conformation of the part, in general a deficiency of bony substance, and a collection of serum forms within the spinal medullary covering: sometimes the spinal marrow at that part is wanting.

DCCXV. The effects of this conformation are various. In some cases, children seem to have been little affected by its presence; in other instances, various species of distortion are combined with it.

DCCXVI. Frequently it is entirely local. In other cases, the fluid seems to have a connection with the brain; and, on pressure of it, morbid symptoms of reaction appear in the head.

DCCXVII. Its fatality depends on its giving way either artificially or by accidental rupture. In the latter case a little gangrenous spot, or slough, forms at one point generally the thinnest spot; which, spreading

wider and deeper, at last opens a way for the escape of the lymph.

DCCXVIII. On this taking place, the child generally dies in a few days, most commonly the third. If the parts, however, close again, life is protracted somewhat longer.

DCCXIX. Hætic symptoms, also, often precede the rupture of the teguments; which increasing rapidly on the rupture, the child becomes convulsed, and is suddenly cut off.

DCCXX. Life is seldom protracted under this disease above a few weeks. The rupture of the tumor is the critical period; yet some instances have been known of the child surviving above a twelvemonth; but it forms a very singular occurrence.

DCCXXI. From the general fatality of this disease, little can be attempted in the way of cure.

DCCXXII. Puncture and pressure have been lately recommended; but to this many objections arise, and the facts of authors strongly oppose it. But though puncture is always inadmissible, pressure may be proper to a certain extent, with a view to prevent the rupture of the teguments, and thus to suspend as far as possible the fatal event.

DCCXXIII. This pressure will succeed best in these cases where the tumor is low down on the sacrum, where it does not seem to affect the head by any repul-

sion of the fluid; and with this pressure the use of astringent powders sprinkled on the part, as the armenian bole, catechu, and alum, may be conjoined.

DCCXXIV. Wherever this pressure seems to produce or increase the morbid symptoms, it should be then laid aside, and the treatment trusted then entirely to the use of the astringent powder and lotion, with a view to preserve the teguments.

DCCXXV. Soft poultices have been recommended by some authors; but their effect can only be to hasten the event; neither does such a degree of inflammation attend as to render them necessary in order to obviate this symptom.

Parenchymatous.

DCCXXVI. Spongy vascular tumors appear in the same situation at birth as the former, but without any affection of the bone, or recession of their fluid on pressure. They have been termed by authors parenchymatous, a term not altogether proper.

DCCXXVII. The treatment here consists either in the use of astringents and pressure, as the Armenian bole, catechu, &c. sprinkled on the part, and a piece of thin lead made to cover it, or in extirpation of the tumor altogether. In doing this, attention is required to the hæmorrhage, as a good deal of blood is frequently lost.

Congenite Hernias.

DCCXXVIII. The ventral hernia of this period is a rare occurrence. The species of it termed hepartomphalus has been known in the living subject; and even the child has been known to survive, and the liver been retracted into its situation in the course of a certain time. In the way of treatment, nothing can be done but leaving the process to nature, by keeping the tumor easy, and counteracting any tendency to gangrene.

DCCXXIX. The navel hernia, or exomphalus, appears at times soon after birth; and, if immediately attended to, is easily cured by cold bathing. When neglected, it proves extremely troublesome, especially to the female sex; and, for its treatment, a proper compression of the part becomes necessary.

DCCXXX. This is done in various ways, suited to the period of life and the stage of the disease.

1. By a compress made of sticking plaster, with a bit of card interposed.

2. By a bit of bees' wax formed into the same shape, and applied in the same way.

3. By straps of adhesive plaster applied star-ways across the navel, so as to bring the parts fully together, and occasionally renewed when giving way; or,

3. By Squirel's elastic bandage.

DCCXXXI. A predisposition to this affection pre-

vails in those children in whom the skin of the belly extends far upon the navel-string.

DCCXXXII. Ruptures in the groin are more dangerous than the umbilical. They readily yield, however, to cold bathing, and seldom even require the assistance of a bandage. In some cases, where the swelling gets large, and where the child is liable to fits of crying, a steel truss may be necessary; but it is both difficult in its application, and it requires much attention, when applied, to mark if it continues properly placed, and does not injure the parts.

DCCXXXIII. When the child is more advanced, that is, after two years, should the rupture still continue, a truss may be highly useful; and the cure of every rupture during infancy will be much expedited by the use of cold bathing.

DCCXXXIV. It is seldom in infancy that strangulation takes place. Should it happen, its chief symptom will be the rejection of every thing by the stomach. In all cases of vomiting, therefore, this cause should be suspected; and, if joined to a heat and swelling of the part, hernia is then the source of the evil, and its replacement must be attempted the same as in adults, directed in vol. II. and the bowels also opened by injections and laxatives, as there recommended.

Congenite Hydrocele.

DCCXXXV. Hydrocele, in infants, is generally coeval with birth. It is distinguished by the transparency of its tumor, by its want of pain, by its not retiring on pressure, nor its being enlarged by crying.

DCCXXXVI. The cause of this affection is either relaxation or injury of the part.

DCCXXXVII. Its treatment is very simple, and it readily yields to the use of any astringent lotion, as a compress of vinegar and water, or Mindererus' spirit, applied to the part, and occasionally renewed. If any case more obstinate than common occurs, the treatment recommended in adults, vol. II. p. 277, may be attempted.

DCCXXXVIII. In no case, when once removed, does the hydrocele of infancy return.

*Congenite Imperfections of Parts.**Of Vagina.*

DCCXXXIX. Imperforation of the vagina occurs, at times, in different degrees, and is divided into the external and internal. The former consists simply in the expansion of the hymen, which, at the age of puberty, when entire, requires an operation, as already described in p. 12.

DCCXL. The latter, or internal, consists of a fleshy mass, filling up the cavity, for which there is, in general, no relief.

DCCXLI. Besides imperforation, the aperture of the vagina is often, naturally, so small, as to require an operation for its enlargement with the point of a lancet, dividing the line of its apparent extent, and keeping the parts open with a piece of fine lint, or sponge, for a few days; or, instead of the lancet, the enlargement may be simply made with the fingers, and a little oozing of blood will follow the operation.

DCCXLII. It is, on all occasions, proper to examine this circumstance of the aperture of the vagina, in order that, when a defect takes place, it may be timely perceived, and relief afforded previous to the age of puberty.

Of Anus.

DCCXLIII. This defect we examined fully in vol. II. p. 328, and pointed out the means of relief, so that nothing new remains to be added here.

Of Penis.

DCCXLIV. Imperforation takes place here in various ways. The first is when the urethra is simply choaked with mucus, the washing out of which with

warm milk and water, and the insertion of a probe, will be sufficient to remove it.

DCCXLV. The second is when the urethra is wanting for the extent of the glands. Here the introduction of a small treacar, till it meets the natural opening, will be sufficient; and this perforation must be kept open till healed on a bougie.

DCCXLVI. The third is the opening of the urethra taking place on the under part of the glands, or at one side. These defects will all admit being remedied; and, in doing this, much must depend on the judgment of the operator.

DCCXLVII. The fourth is the penis drawn downwards, or to one side. Here the skin, where too tight or short, must be divided, and the edges kept at a distance till the sore is healed.

Of Lips.

DCCXLVIII. The hare-lip is the chief defect of this part, which we already considered fully in vol. II. p. 233.

Of Ears.

DCCXLIX. Defects here are generally incurable.

Of Eyes.

DCCL. The most common defect of vision in young children is that of squinting. It is either coeval with birth, the effect of disease or convulsions, or else it is a deformity acquired by habit. In the two first cases it is generally incurable.

DCCLI. In the last it admits a cure, by drawing the distorted eye in a right direction by the attraction of some bright colour, as a piece of bright-coloured silk on a bit of plaster, placed towards the nose or temple, always opposite, according to the situation of the distortion. Where both eyes are distorted, the use of goggles will answer the same purpose, or an opaque covering with a small aperture, which should be worn so long as the bad habit remains.

Of Feet.

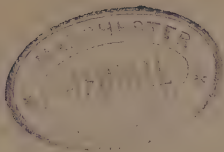
DCCLII. The feet are found at birth distorted in various directions, which have received different appellations.

DCCLIII. The method of treatment is the same in all cases, viz. the application of a gradual pressure in the opposite direction to that of the distortion, and this made by means of a machine constantly worn for the purpose.

Original Marks.

DCCLIV. Marks of various kinds also appear at birth, and disfigure various parts of the external surface. So far as relief can be obtained by surgery, this subject is treated in vol. II. p. 146. It is clearly the effect of malconformation, and no way imputable to the imagination of the mother, as she can have no influence or power in their production,





AN

INFANTILE PHARMACOPŒIA ;

DIVIDED INTO

THREE PARTS,

viz.

MATERIA MEDICA, CLASSIFICATION,

AND

EXTEMPORANEOUS PRESCRIPTION.

PART I.
MATERIA MEDICA.

CONTAINING
THE ACTIVE REMEDIES

In Present Practice,

SIMPLE, COMPOUND, AND CHEMICAL,
WITH THEIR DOSES.



Simple.	Parts used.	Dose.	Compound and Chemical.	Dose.
Abſinthium.	Tops.		Sal. Abſinthii,	gr. v.
Wormwood.		℞ſs. to ʒi.	Tinct. Abſinthii,	ʒi. to ʒij.
Acetum Vini.			Sal Aceti.	
Vinegar.			Syrup. Aceti,	ʒi.
			Serum. Acet. ad libitum	
			(ʒi. Acet. ad lb.i. Laſt.)	
Acidum Vitrioli-			Sp. Vitriol. tenuis, gutt. x. to xx.	
cum.			vel Acid. Vitriol. dilut.	
Vitriolic Acid.			Sp. Vitriol. dulcis,	ʒi.
			vel Sp. Ætheris Vitriol.	
			Sp. Æther. Vitr. gutt. xxx.	
			vel Æther. Vitriolus.	
			Elix. Vitr. Acid. gutt. xxx.	
			vel Acid. Vitr. Aromat.	
			Elix. Vitr. dulc. gutt. xxx.	
			vel Sp. Æth. Vitr. Arom.	
Acid. Muriatic.		gutt. xii.		
Muriatic Acid.		ter de die.		
Acorus.	Roots.			
Sweet Flag.				
Ærugo,			Ung. Ærugin.	
vel cuprum acido				
acetof. roſ.				
Verdigreale.			Aqua Sappharina.	
			vel Aqua Ærug. ammon.	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Allium.</i>	Root.		Syrup Allii,	3 ij. to 3 ff.
Garlic.		3 ff. dried.	Oxymel Allii,	3 ff. to 3 vi.
<i>Aloe.</i>		gr. iij to 3 ff.	Tinct. Sacra,	3 ij. to 3 ff.
Aloes.			vel Vinum Aloeticum.	
			Pil. Aloetic.	
			vel Pil. Aloes cum Myrr.	
			Pil. Rufi,	3 i. to 3 ff.
			Elix. Proprietatis,	gutt. xv. to 3 i.
			vel Elix. Aloes cum Myrr.	
			Elix. Proprietatis Vitriolici,	gutt. xv. to 3 i.
			vel Tinct. Aloes vitriol.	
<i>Althea.</i>	Leaf and	3 i. to 3 ff.	Decoct. Altheæ, lb. ij. indies	
Marshmallow.	root.		(3 i. to lb. i.)	
			Syrup. Altheæ,	3 i. sæpe.
<i>Alumen.</i>		gr. iv. to 3 i.	Pulv. styptic.	gr. x. to 3 i.
Alum.			vel Pulv. Alum. comp.	
			Serum Alumin.	3 iv. to lb. ij.
			Coag. Aluminos.	
			Aqua styptic.	
<i>Amygdalæ amaræ.</i>	Kernel.			
Bitter Almonds.		gr. iv. to 3 ff.	Ol. Amygd. Amar.	
<i>Amygdalæ dulces.</i>	Kernel.		Ol. Amygdal.	3 i. to 3 ij.
Sweet Almonds.	ad libit.		Emulsio cois,	ad libit.
<i>Amylum.</i>			Mucilago Amyli,	3 i. sæpe.
Starch.				
<i>Anethum.</i>	Seed.		Ol. Anethi,	gutt. iij.
Dill.		3 i. to 3 i.	Aq. Anethi,	3 ij. to iv.
<i>Ammoniacum.</i>		3 i. to 3 i.	Lac Ammon.	3 i. sæpe.
G. Ammoniac.			Emplastr. Ammon.	
<i>Angustura</i>	Bark.	3 i. to 3 i.	Decoct. Angust. lb. ij. indies.	
			Tinct. Angust. 3 i.	
<i>Anisum.</i>	Seed.		Ol. Anisi,	gutt. iij.
Anise.		gr. iv. to xv.	Aq. Anisi,	3 ij. to iv.

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Antimonium,</i> <i>vel Antimon.</i> <i>Preparat.</i> <i>Antimony.</i>			Crocus Metallor. <i>vel Crocus Antimonii.</i> Sulph. Aurat. Ant. <i>vel Sulphur. Antimonii præ-</i> <i>cipitatum.</i> Pulv. Antimon. gr. iij. to vi. Calx. nitrata Ant. <i>vel</i> Pulv. Jacob. gr. v. to xii. ter indie <i>vel Antimon. ust. cum Ni-</i> <i>tro.</i> Tartarus Emeticus, gr. i. to vi. <i>vel Antimon. tartarizat.</i> Vinum <i>è</i> Tartar Emetic. <i>vel Vin. Antimon. tartari-</i> <i>fati.</i> Vin. Antimonial. gtt. v. to 3℥. <i>vel Vin. è Tartar Antim.</i>	gr. i. to vi. gr. iv. to xvi. gr. iij. to vi. gr. v. to xii. ter indie gr. i. to vi. gutt. xv. to xxx. gutt. v. to 3℥. ad libit. 3iv. ad lb. i. ad libit.
<i>Arabicum.</i> Gum. Arabic.		3ij.	Trochisci albi, Mucilago Gum. Arabic. Emulsio Arabic.	ad libit. 3iv. ad lb. i. ad libit.
<i>Aristolochia tenuis.</i> Root. Birthwort.		3i. to 3ij.		
<i>Arnica.</i>	Herb, flowers, and root.		Decoct. Arnicæ, (3i. flor. lb. i.) Extract. Arnicæ,	lb. i. indie 3ij. to iv. indies.
Leopard's bane.		3i. to 3i.		
<i>Arsenicum.</i> Arsenic.		gr. $\frac{1}{2}$ to iij.	Solut. Arsenic. (gr. iv. to lb. i.) a table spoonful.	
<i>Arum.</i> Wake-robin.	Root.	3℥. to 3i.	Pulv. Ari comp	3i. to 3i

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Asa-fœtida.</i>		gr. x. to ʒ ss.	Pil. Gum. vel Pil. <i>Asa-fœtida</i> com. Tinct. fœtida, gutt. x. to ʒi. vel Tinct. <i>Asa-fœtida</i> .	ʒi.
<i>Asarum.</i>	Leaves.		Pulv. sternutat. vel Pulv. <i>Asari</i> comp.	ʒi. to ʒi.
<i>Asarabacca.</i>		ʒ ss. to ʒi.		
<i>Aurant. Hispanense.</i>	Leaf, flower, juice of fruit, & outer rind.		Aq. Cort. Aurant. Syrup. Cort. Aur. Conserv. Aurant. Ol. Neroli.	ʒij. to iv. ʒi. ad. libit.
Seville Orange,		ad. libit.		
<i>Avena.</i> Oats.	Seed.			
<i>Balsamum Cana- dense.</i>				
Canada Balsam.		gtt. xx. to xxx.		
<i>Balsam. Copaiba.</i>				
Capivi Balsam.		gtt. xx. to xxx.		
<i>Balsam. Gileadense.</i>				
Balsam of Gilead.		gutt. x. to xl.		
<i>Balsam. Peruvian.</i>				
Balsam of Peru.		gutt. x. to xl.		
<i>Balsam. Toletan.</i>			Tinct. Toletan.	gutt. v. to xx
Balsam of Tolu.		gr. v. to ʒi.	Syrup. Balsam. vel Syrupus Toletanus.	ʒi. to ij
<i>Bardana.</i> Burdock.	Root.		Decoct. Bardanæ,	ʒij. sap
		ʒi. to ʒi.	(ʒij. to lb. i.)	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical. Dose.</i>
Carilla. Impure Fossile Alkali.)			Soda purificata, ℥ss. to ℥i. Sal Rupellensis, 3℥. to 3x. <i>vel Soda tartarificata.</i> Sal Glauberi, 3v. to 3x. <i>vel Soda vitriolata.</i>
Belladonna. Deadly Night-shade.	Leaves.	Infus. Belladon. gr. i. to vi. (gr. i. to 3i.) Extract. Bellad. gr. i. to iv.	3i.
Benzoinum. Benjamin.		Flor. Benzoin. gr. iv. to vi. gr. iv. to xv. <i>vel Acidum Benzoicum.</i> Tinct. Benzoin. gutt. x. to xl. Elix. Traumat. gutt. x. to xxx. <i>vel Tinct. Benzo. comp.</i>	
Asafoetida. Asafoet, or Snake- weed.	Root.	gr. x. to 3i.	
Asa. Asafoetida.		gr. x. to ℥ij. Sal sedativ. Hombergii, gr. iij. to ℥i.	
Asa viva.			Aqua Calcis, 3iv. to lb. i. Lin. Aq. Calcis. Lixivium caustic. gutt. xv. to xl. <i>vel Aq. Lixiv. caustic.</i> Lix. caust. acer. mit.
Asa. Asafoetida.		gr. iij. to 3℥. Sp. Vinos. Camph. Emulsio Camphor. ad. libit. Bals. Opodeldoch. <i>vel Linim. saponaceum.</i> Linim. volat. <i>vel Oleum Ammoniacum.</i> Aq. Vitr. camp.	
Asa alba. Cinnamon.	Bark.	gr. iv. to vi.	
Asa. Asafoetida.			Oculi Cancrorum, ℥i. to 3i. Chelæ Cancror. 3i. to 3i.

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose</i>
<i>Cantharis.</i> Spanish Fly.		gr. ff. to ij.	Tinct. Canthar. Emplastr. Vesicator. vel Emplastr. Cantharid. Ung. epispal. fort. vel. Ung. Pulv. Canthar. mit. vel Ung. Infus. Canthar.	gutt. xx to xxx
<i>Cardamine.</i> Lady's Smock.		ʒi. to ʒi.		
<i>Cardamom minus.</i> Lesser Cardamom.	Seed.	gr. iij. to ʒ ff.	Tinct. Cardom.	ʒi. to ʒ
<i>Carduus benedict.</i> Holy Thistle.	Leaves.	gr. i. to ʒi.		
<i>Carvi.</i> Carraway.	Seeds.		Ol. Carvi, Aq. Carvi, spirit. vel Spiritus Carvi.	gutt. ii ʒij. to i ʒ
<i>Caryophylla arom.</i> Clove.	Fruit.	gr. iij. to ʒ ff.	Ol. Cary.	gutt. ii
<i>Caryophylla rubra.</i> Clove July flower.			Syr. Carophyl.	ʒ
<i>Cascarilla.</i>	Bark.	gr. iv. to xij.	Infus. Cascaril. (ʒi. to lb. i.)	ʒii
<i>Cassia fistularis.</i> Cassia of the Cane.	Fruit.	ʒij. to ʒi.	Elect. Cassiæ,	ʒ ff. to ʒ
<i>Cassia lignea.</i> Cassia Bark.	Bark & flowers.	ʒi. to ij.	Aq. Cassiæ,	ʒij. to i
<i>Castoreum.</i> Castor.		gr. iv. to ʒi.	Tinct. Castor. Tinct. Cast. Comp.	ʒ
<i>Catechu.</i> Japan Earth.		ʒi. to ʒ ff.	Tinct. Japonic. vel Tinct. è Catechu. Conf. Japonic. vel Electuar. Japon. Infus. Japonic. vel Infus. Catechu.	ʒi. to gr. v. to ʒ ʒij. to i

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical. Dose.</i>
<i>Centaur. minus.</i>	<i>Tops.</i>		
<i>Lesser Centaury.</i>		3 ff.	
<i>Cera alba et flava.</i>			<i>Linim. simplex.</i>
<i>White and Yellow</i>			<i>Ung. simplex.</i>
<i>Wax.</i>			<i>Cerat. simplex.</i>
			<i>Ung. Basilicon.</i>
			<i>vel Ung. Resinosum.</i>
			<i>Emplast. cereum.</i>
			<i>vel Emplast. simplex.</i>
<i>Cerussa.</i>			<i>Sacchar. Saturni, gr. ʒi to i.</i>
<i>White Lead.</i>			<i>vel Cerussa acetata.</i>
			<i>Ung. Saturni,</i>
			<i>vel Ung. Ceruss. acetat.</i>
			<i>Ung. album,</i>
			<i>vel Ung. Cerussæ.</i>
			<i>Tinct. antiphthif. gutt. xx.</i>
			<i>to xxx.</i>
			<i>vel Tinct. Ceruss. acetat.</i>
<i>Chamæmelum.</i>	<i>Single</i>	<i>Extra Cham. gr. vi. to ʒ ff.</i>	
<i>Chamomile.</i>	<i>flower. gr. v. to ʒi.</i>	<i>Decoct. cois, ad libit.</i>	
		<i>vel Decoct. Chamæmel.</i>	
<i>Cicuta.</i>	<i>Leaves,</i>	<i>Extr. Cicut. gr. v. to ʒi.</i>	
<i>hemlock.</i>	<i>flower, gr. vi.</i>		
	<i>& seed. to cxxviii.</i>		
<i>Conchas clavellati.</i>		<i>Lixiv. purificat. gr. iij. to v.</i>	
<i>ot or Pearl ash.</i>		<i>Tart. regenerat. ʒi.</i>	
		<i>vel Lixivia acetata.</i>	
		<i>Tart. vitriolat. ʒi. to v.</i>	
		<i>vel Lixivia vitriolata.</i>	
		<i>Tart. solubile, ʒ ff. to ʒi.</i>	
		<i>Lixivia tartarizata.</i>	
<i>Cinnamomum.</i>	<i>Bark.</i>	<i>Species aromat. gr. v. to xv.</i>	
<i>Cinnamon.</i>	<i>gr. iij. to ʒ ff.</i>	<i>vel Pulv. Aromaticus.</i>	
		<i>Conf. Cardiac. ʒi. to ij.</i>	
		<i>vel Elect. Aromaticum.</i>	
		<i>Ol. Cinnam. gutt. ij.</i>	
		<i>Tinct. aromat. ʒi. to ij.</i>	
		<i>vel Tinct. Cinn. comp.</i>	
		<i>Tinct. Cinnam. ʒi. to ij.</i>	
		<i>Aq. Cinn. ʒij. to iv.</i>	
		<i>spirit. ʒi.</i>	
		<i>vel Spiritus Cinnamomi.</i>	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical. Dose.</i>
<i>Coccinella.</i> Cochineal.		gr. xij. to 3 ff.	
<i>Cochlearia.</i> Scurvy-Grass.	Leaves.	Succ. ad scorbut. 3 ij. to v 3 ff. to ij.	vel Suc. Cochlear. comp.
<i>Colchicum.</i> Meadow Saffron.	Root.	Syrup. Colchici. 3 i. to i gr. ij. to 3 i.	ter indie
<i>Colocynthis.</i> Bitter Apple.	Fruit.	Pil. Cocciaë, 3 i. to i gr. v. to 3 i.	vel Pil. Aloes, cum Coloc.
<i>Columba.</i> Columbo.	Root.	Tinct. Columbæ, 3 ff. to gr. x. to 3 i.	
<i>Contragerya.</i> Counter-poison.	Root.	Pulv. Con. com. 3 i. to 3 gr. vi. to 3 ff.	
<i>Coriandrum.</i> Coriander.	Seed.	3 i. to 3 i.	
<i>Cornu Cervi.</i> Hartshorn.		Sal C. C. gr. iij. to x 3 ff. to 3 i.	vel Ammonia præparata. Sal C. C. volat. gr. vi. to 3 Ol. C. C. gutt. vel Aq. Am. ex Offibus. Sp. C. C. gutt. xv. to 3 Decoct. alb. 3 iv. sæp
<i>Cortex Peruvianus.</i> Peruvian Bark.		Extr. C. P. gr. v. to 3 3 i. to 3 i.	Decoct. C. P. lb. i. to ij. in vel Decoct. Cinchonæ. Tinct. C. P. vel Tinct. Cinchonæ.
<i>Creta alba.</i> Chalk.		Pulv. cretaceus, 3 i. to 3 3 i. to 3 i.	Potio cretacea, 3 iv. sæp Trochisci Cretæ, ad lib
<i>Crocus.</i> Saffron.	Chives.	Tinct. Croci, gutt. x. to gr. v. to 3 i.	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Elaterium.</i>	Fruit.			
Wild Cucumber.		gr. i. to iij.		
<i>Cuprum vitriolatum.</i>			Aq. styptic.	
Blue Vitriol.		gr. $\frac{1}{4}$ to i.	vel Aq. cup. vitr. comp.	
<i>Digitalis.</i>	Plant.			
Fox-glove.		gr. i. to viij.		
<i>Dolichos.</i>	Down			
Coweech.	of the pod.	gr. ij. to viij.		
<i>Ferrum.</i>				
Iron.			Limatura.	gr. iv. to viij.
			Mars-saccharat.	gr. iv. to viij.
			Vitriol. calcinat.	gr. ff. to iij.
			vel Ferrum vitr. exsicc.	
			Colcothar. vitriol.	gr. ff. to iij.
			vel ————	ustum.
			Flores martiales,	gr. vi. to ʒi.
			vel Ferrum ammoniatum.	
			Tinct. Martis,	gutt. x. to xx.
			Sal Chalybis,	vel Vitriol.
			Martis,	gr. ij. to vi.
			vel Ferrum Vitriolatum.	
<i>Filix Mas,</i>	Root.			
Male Fern.		ʒi.		
<i>Fœniculum dulce.</i>	Seeds.			
Sweet Fennel.		ʒi.		
<i>Fuligo Ligni.</i>				
Woodfoot.			Tinct. Fulgin.	gutt. x. to ʒi.
<i>Fumaria.</i>	Leaves.			
Fumitory.		ʒ ff. to j.	Infus. Fumar.	ʒij. to iv.
<i>Galbanum.</i>				
Galban.		gr. x. to xv.		

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Gallæ.</i> Galls.		gr. ij. to vi.		
<i>Gambogia.</i> Gamboge.		gr. ij. to vi.		
<i>Gentiana.</i> Gentian.	Root.	Extr. Gentian. Infus. amar. <i>vel</i> Infus. Gentiani comp. Vin. amar. <i>vel</i> Vin. Gentiani comp. Elix. stomach. <i>vel</i> Tinct. amar. <i>vel</i> G. c.	gr. v. to ff. 3i. to 3iv. 3i. to 3ij. 3i. to 3ij. 3ff.	
<i>Geofræa.</i> Cabbage-tree.	Bark.	Infus. Geofrææ, gr. ij. to x. (3i. to lb. ij.)	3ff. to iv. indies.	
<i>Glycyrrhiza.</i> Liquorice.	Root.	Extr. Glyc. 3ff. to 3i. Decoct. Glyc. (3i. to lb. ij.) Trochisci, <i>vel</i> Trochisci Glycyrrh.	ad libit. idem idem	
<i>Granata Malus.</i> Pomegranate.	Flowers & rind of the fruit.	3i. to 3i.		
<i>Gratiola.</i> Hedge-Hyssop.	Leaves.	Infus. Gratiol. gr. x. to 3i. (3i. to 3iv.) Extr. Gratiol.	3ff. to 3ij. gr. 3ij. to 3i.	
<i>Guaiacum.</i> Guaiac.	Wood, bark, & resin.	Gum Guaiac. 3ff. Elix. Guaiac. gutt. xx. to 3ff. <i>vel</i> Tinct. Guaiaci. Elix. Guaiac. volat. <i>vel</i> Tinct. g. ammoniata.	3ff. to 3ff. 3ff.	
<i>Hordeum.</i> Barley.	Seed.	Decoct. Hordei.	ad libit.	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical. Dose.</i>
<i>Hydrargyrus.</i> <i>Mercury.</i>		3℥. to ij.	<i>Merc. calcinat.</i> gr. i. to ij. <i>vel Hydrarg. calcinat.</i> <i>Pil. Mercur.</i> gr. x. to xv. <i>vel Pil. Hydrargyri.</i> <i>Pil. Æthiopicæ,</i> gr. x. to ℥i. <i>Æthiops Mineral.</i> 3ij. <i>vel Hydr. sulphur. niger.</i> <i>Pil. Plummeri,</i> gr. x. to ℥i. <i>vel Pil. Calomelan. comp.</i> <i>Ung. cœruleum,</i> <i>vel Ex. Hydrarg.</i> <i>Ung. Citrin.</i> <i>vel Ung. Hydr. nitr.</i> <i>Ung. Calc. Hydrar. alb.</i> <i>Emplast. cœrul.</i> <i>vel Empl. Hydr.</i> <i>Mer. corros. subl.</i> gr. ℥. to ij. <i>vel Hydr. muriat. corros.</i> <i>Mer. dulcis,</i> gr. i. to v. <i>vel Calomelas.</i> <i>Turpeth. mineral.</i> gr. ℥. to i. <i>vel Hydr. vitriolat. flav.</i> <i>Mer. cinereus,</i> gr. ij. to iv. <i>vel Hydr. præcip. ciner.</i> <i>Mer. præc. rubr.</i> gr. i. to ij. <i>vel Hydr. nitrat. rubr.</i> <i>Mer. præc. alb.</i> gr. ii. to ij. <i>vel Calx. Hydrarg. alb.</i>
<i>Hyosciamus.</i> <i>Henbane.</i>	Herb, & seeds.		<i>Extr. Hyf.</i> gr. i. to ℥i.
<i>Jalapium.</i> <i>Jalap.</i>	Ro	gr. x. to ℥ij.	<i>Pulv. Jalap. comp.</i> ℥i. to 3℥. <i>Pil. è Jalap.</i> gr. x. to xv. <i>Refin. Jalap.</i> ℥℥. to i. <i>Tinct. Jalap.</i> 3ij. to vi.
<i>Pecacubana.</i> <i>Pecacuhan.</i>	Root.	℥℥. to i.	<i>Pulv. Dover.</i> gr. xv. to ℥i. <i>vel Pulv. Ipecac. comp.</i> <i>Tinct. Ipecac.</i> 3℥. to ij. <i>vel vin. Ipecac.</i>

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose,</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Juniperus.</i>	Berry		Ol. Juniperi,	gutt. iij.
Juniper.	& top.	℥ij. Bacc.	Aq. Junip. comp.	℥i.
			vel Sp. Juniper. comp.	
Kino.		gr. viij.	Tinct. Kino,	3℥. to i.
Gum Kino.		to xij.		
<i>Lapis calaminaris.</i>			Cerat. Lap. cal.	
Calamy.				
<i>Lavendula.</i>	flower		Ol. Lavand.	gutt. v.
Lavender.	& tops.	℥i. to iij.	Sp. Lavand	gutt. xxx. to ℥i.
			Sp. Lav. Comp.	idem.
<i>Lichen Islandicus.</i>			Mucilag. Lichen.	ad libit.
Iceland Liverwort.		℥i. to iij.		
<i>Lignum Campachense.</i>			Extr. L. C.	gr. v. to xv.
Logwood.		gr. x. to ℥i.	Decoct. L. C.	℥iv. saepe.
			(℥iij. to lb.ij.)	
<i>Lilium album.</i>	Root.		Mucilag. Rad.	ad libit.
White Lilly.		℥i. to ℥i.		
<i>Limon.</i>	Juice,		Succ. Limon.	℥i. to ij.
Lemon.	outer		Syrup. Limon.	℥i.
	rind, &c		Aq. Limon.	℥ij. to iv.
<i>Linum.</i>			Infus. Lin.	ad libit.
Lintseed.			(3℥. to lb.℥.)	
			Ol. Lini.	℥i
<i>Lithargyrus.</i>			Acet. Lithargyr.	gtt. x. to ℥i
Litharge.			Aq. Veg. mineral.	
<i>Lobelia.</i>	Root.		Decoct. Rad. ficc. lb. ii. in dies	
Blue Cardinal			(℥iv. to lb. v.	
Flower.				
<i>Manna.</i>			Serum Mannæ,	ad libit
Manna.		℥ij.		
<i>Magnesia alba.</i>				
Magnesia.		℥i. to ℥ij.		
<i>Mastiche.</i>				
Mastic.		gr. ij to xij.		

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Melampodium.</i>	Root.		Extr. Melam.	gr. v. to ℥ss.
Black Hellebore.		gr. vi. to 3ss.	Tinct. Melamp.	gr. v. to ℥ss.
<i>Mentha Pipirit.</i>	Leaves.		Ol. Menthæ,	gutt. iij.
Peppermint.			Aq. Menth.	3ij. to iv.
			spirit.	3i.
			vel Sp. Menthæ.	
<i>Mentha Sativa.</i>			Infus. callid. vel Thea.	
Spearmint.			(3i. to lb. i.)	ad libit.
<i>Menyanthes.</i>				
Marsh Trefoll.		℥i. to ij.		
<i>Mezereon.</i>		gr. ss. to iij.	Decoct. Mez.	lb. ij. in dies
			(3i. to lb. iij.)	
<i>Millepedæ.</i>		gr. iij. to v.	Vin. Millep.	3i. to iij.
Slaters, or Woodlice,				
<i>Moschus.</i>			Tinct. Moschi,	gtt. xxx. to 3i.
Musk.		gr. iij. to xij.		
<i>Myrrba.</i>			Tinct. Myrrhæ,	gtt. xv. to 3i.
Myrrh.		gr. iij. to xij.		
<i>Nicotiana.</i>			Infus. Nicot.	gtt. lx. to cxx.
Tobacco.			Vin. Nicot.	idem.
<i>Nitrum.</i>			Acid. nitros. tenue	gtt. aliq.
Nitre.		gr. vi. to ℥i.	Trochisci Nitri,	ad libit.
			Sp. Nitri dulcis,	3ss. to i.
			vel Sp. Ætheris nitrosi.	
			Caustic. Lunar.	
			vel Argentum nitratum.	
			Sal Polychrest.	3ij. to 3ss.
			vel Lixivia Vitriol. sulph.	
<i>Nux Moschata,</i>			Aq. Nuc. spirit.	3i. to 3i.
vel Myristica.			vel Sp. Myristicæ.	
Nutmeg.		gtt. xv. to 3i.		
<i>Olibanum.</i>				
Frankincense.		gr. v. to ℥i.		

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Radix Indica Lopez.</i> Indian, or Lopez's Root.		℥ss.		
<i>Rhamnus Cathart.</i> Root. Buck Thorn.		3i. to iij.	Syrup. Rhamn.	℥i. to iij.
<i>Rheum.</i> Root. <i>Rhubarb.</i> "		℥i. to 3i.	Pil. stomach. <i>vel Pil. Rhei comp.</i> Infus. Rhei, Tinct. Rhei, Vin. Rhei dulc. —— amar. Elix. Sacchr. <i>vel Tinct. Rb. cum Aloe.</i>	3ss. 3ij. to iv. 3ij. to 3ss. 3i. 3i. 3i.
<i>Rhododendron.</i> Herb.		gr. ij. to iv.	Decoct. Rhodod.	3ij. to v.
<i>Ricini Ol.</i> Seed. Castor Oil.		3ij. to 3ss.		
<i>Rosæ pallidæ.</i> Petal. Pale Roses.			Aq. Rosar. Syrup. Rosar.	3ij. to iv. 3i.
<i>Rosæ rubræ.</i> Petal. Red Roses.			Conserv. Rosar. Tinct. Rosar. <i>vel Infus. Rosar.</i> Syrup. Rosar.	3ss. 3i. saepe. 3i.
<i>Rosmarinus.</i> Top & Rosemary. flower.			Ol. Rosmar. Aq. Sp. Rosmar. <i>vel Sp. Rosmarin.</i> Aq. Regin. Hung. Acet. Aromat.	gutt. iij. 3i. to 3i. idem. 3i. to ij.
<i>Rubia.</i> Root. Madder.		3ss. to i.		
<i>Ruta.</i> Herb. Rue.		℥ss. to 3i.	Ol. Rutæ, Infus. Rutæ, (3i. to lb.i.) Extr. Sab. Decoct. Sabin. (3i. to lb. iij.)	gutt. iij. 3ij.
<i>Sabina.</i> Leaf. Savine.		3ss. to i.		gr. v. to ℥ss. 3ij. to iv.

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Sagapenum.</i> Sagapen.		gr. v. to ℥i.		
<i>Sal Ammoniacum.</i> Ammoniac Salt.		℥ss. to i.	Sal Ammon. vol. gr. v. to ℥i. vel Ammon. præparata. Sp. Sal Am. gutt. xv. to ℥i. vel Aq. Ammoniac. Sp. Sal Am. cum Calce. vel Aq. Am. caustic. Sp. Sal Am. vin. gutt. x. to ℥i. vel Sp. Ammoniac. Sp. Salin. arom. gutt. x. to xl. vel Sp. Am. aromat. Sp. volat. foetid. gutt. x. to xxx. vel Sp. Am. foetid. Sp. Mindereri, ℥ij. to ℥i. vel Aq. Am. acetat.	
<i>Sal marin. His.</i> Sea Salt.			Sp. Sal marin. gutt. v. ℥i. vel Soda muriata.	
<i>Salvia.</i> Sage.	Leaf.	℥i. to ℥iij.	Infus. Salvæ, ad libi t (℥ij to lb.i.)	
<i>Sambucus.</i> Elder.	Inner bark, flower, & berry.		Decoct. Samb. ℥ss. to i. (flor. mp. i. to ℥viij.) Rob. Samb. ℥i. to ℥iij.	
<i>Sal Cathart. amar.</i> vel <i>Magnesia vitriolata.</i> Bitter Cathartic Salt.		℥ij. to ℥ss.		
<i>Sapo alb. Hispan.</i> Castile Soap.		℥i. to ℥ij.	Pil. Sapo. gr. v. to ℥i. Linim. saponac.	
<i>Sarsaparilla.</i>	Root.	℥i. to ℥ss.	Decoct. Sarsæ, lb. ij. in diss. (℥i. to lb.i)	
<i>Sassafras.</i>	Wood, root, & bark.	℥ij.	Decoct. Lignor. idem.	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Scammonium.</i>			Pulv. Scam. c.	℥i. to ij.
Scammony.		gr. ij. to xij.		
<i>Scilla.</i>	Root.		Pulv. Siccāt.	gr. i. to iij.
Squill.		gr. ij. to vi.	Pil. scillit.	gr. xv.
			Acet. scillit.	℥i. to 3℥.
			Oxymel scillit.	3℥. to 3iij.
			Syrup. scillit.	℥i. to 3ij.
			Vin. scillit.	
			(rad. 3℥. ad vin. lb. ij.)	
			3℥. pro dose.	
<i>Scordium.</i>				
Water Germander.		gr. v. to ℥i.		
<i>Seneka.</i>	Root.		Decoct. Senekæ,	3ij. to iv.
Senega.		℥i. to iij.	(3i. to lb. i.)	
<i>Senna.</i>	Leaf.		Elect. Lenitiv.	3ij. to 3℥.
		3i. to 3℥.	vel Electuār. Sennæ.	
			Elix. salut.	3ij.
			vel Tinct. Sennæ comp.	
<i>Serpentaria.</i>	Root.		Decoct. Serpent.	3i. sæpe.
Snake-root.		3i. to 3℥.	(rad. 3ij. to 3vi.)	
			Tinct. Serpent.	3℥. to ij.
<i>Simarouba.</i>	Bark.	gr. x. to ℥i.	Decoct. Simar.	3ij. sæpe.
			3ij. to lb. i)	
<i>Spermaceti,</i>				
vel Serum Ceti.		℥i. to 3i.		
<i>Sinapi album.</i>	Seeds.			
White Mustard.		3i.		
<i>Spigelia.</i>	Root.			
Indian Pink.		gr. x. to ℥i.		
<i>Spongia.</i>			Spongia usta,	℥i. to 3i.
Sponge.				
<i>Stannum.</i>	Filings			
Tin.	and			
	powder.	3℥. to i.		
<i>Styax.</i>				
Storax.		gr. v. to ℥i.		

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical.</i>	<i>Dose.</i>
<i>Succinum.</i> Amber.			Ol. Succini, gutt. x. to xxv. gr. viij. to 3 ff. Sal Succini, gr. iv. to ʒi.	
<i>Sulphuris Flores.</i> Flowers of Sulphur.		3 ij. to 3 ff.	Ung. antipforic. vel Ung. Sulphuris. Balsam. sulph. gtt. xv. to xxx.	
<i>Tamarindus.</i> Tamarind.	Fruit.		Infus. cum Sennâ, 3 ij. to iv, 3 ij.	
<i>Tartari Chrysalii.</i> Chrystals of Tartar.			Sal Tartar. gr. iij. to xv. 3 v. to vi. Lixiv. Tartar. gutt. xv. to 3i.	
<i>Terebinthina Veneta.</i> Venice Turpentine.			Ol. Terebinth. gutt. v. ʒ ff. to 3 ff. Sp. Terebinth. gutt. x. to xx.	
<i>Tormentilla.</i> Tormentill)	Root.		Infus. Rad. 3 ij. sæpe. ʒ ff. to 3i. (3i. to lb. i.)	
<i>Tussilago</i> Coltsfoot.	Herb & flowers.		Infus. Tussilag. ad libit. (Herb. mp. i. to lb. i.) Syrup. Tussilag. 3i.	
<i>Tutia.</i> Tutty.				
<i>Valeriana sylvest.</i> Wild Valerian.	Root.		Infus. Valerian. ad libit. ʒ ff. to 3 ff. (3i. to lb. i.) Tinct. Val. volat. gtt. xx. to xl. vel Tinct. Valer. Am.	
<i>Veratrum</i> White Hellebore.	Root.		Tinct. Veratri, 3 ff. gr. v. to 3 ff. Decoct. Verat. 3i. sæpe. (3i. ad lb. i.)	
<i>Viola.</i> Violet.	Fresh flower.		Infus. Violar. 3 ij. to viij. 3i. to lb. i.) Syrup. Violar. 3i.	
<i>Vipera.</i> Viper.			Vin. Viperin. 3 ij. to 3i. ʒ ff. to 3i.	
<i>Ulmus.</i> Elm.	Inner bark.		Decoct. Ulmi, lb. ij. in dies. (3ij. to lb. ij.)	
<i>Uva Ursi.</i> Bear's Wortle- berry.	Leaf.		Infus. Uvæ Ursi, 3i. to viij, ʒi. to 3ij. (3ij. to lb. i.)	

<i>Simple.</i>	<i>Parts used.</i>	<i>Dose.</i>	<i>Compound and Chemical. Dose.</i>
<i>Zincum.</i>			Ung. Zinci,
<i>Zinc.</i>			Flor. Zinci, gr. ij. to ℥i.℥.
			vel <i>Zincumustum.</i>
			Aq. Vitriolica.
			vel <i>Aq. Zinci vitriolat.</i>
			Vitriolum album. ℥i.℥. to ij.
			vel <i>Zinc. vitriolat.</i>
<i>Zinziber.</i>	Root.	Infus. Zinziber.	℥ij. to iv.
<i>Ginger.</i>		gr. v. to x. ℥ij. to lb.i.	
		Syrup. Zinziber.	℥i.

T A B L E

Shewing the Quantity of the Principal or Active INGREDIENT
in certain COMPOUND MEDICINES.

OPIUM.

	now	contains
L. Laud.	(<i>Tinct. Opii.</i>)	in each ounce ℥ij. of Opium.
Paregor. Elix.	(<i>Tinct. Opii. am.</i>)	ditto gr. viii. of Opium.
Dover's Powd.	(<i>Pulv. Ipec. comp.</i>)	Dram gr. vi. of Opium.
Thebaic Elect.	(<i>Elect. Opiat.</i>)	ditto gr. i. of Opium.
Japon. Elect.	(<i>Elect. Cath.</i>)	Ounce gr. ij. ss. of Opium.
Pacific Pills.	(<i>Pil. Opi.</i>)	Dram gr. vi. of Opium.
Opium Troch.	(<i>Troch. Glyc. cum Op.</i>)	ditto gr. i. of Opium.
Anod. Balfam.	(<i>Linum. Opiat.</i>)	Ounce ℥j. of Opium.

MERCURY.

	now	contains
Pil. Merc.	(<i>Pil. Hydrar.</i>)	in each Dram gr. iv. of ℥.
Pil. Plum.	(<i>Pil. Calom. comp.</i>)	ditto gr. xxi. of ℥.
Ung. Merc.	(<i>Ung. Hydrar.</i>)	ditto gr. xij. of ℥.
Ung. nitrat.	(<i>Ung. C. trin.</i>)	ditto gr. iv. of ℥, and gr. vii. of acid.
Ung. nitrat. mit.	(<i>Ung. citr. mit.</i>)	ditto gr. ii. of ℥, and gr. iv. of acid.
Emplast. Merc.	(<i>Emp. Hydrar.</i>)	ditto gr. xvi. of ℥.

ANTIMONY.

	now	contains
Tartar emetic		
Wine.	(<i>Vin. Antimon. Tart.</i>)	in each Ounce gr. ij. of Tartar.

SCAMMONY.

		contains
Comp. Powder		
of Scammony.	(<i>Pulv. Scam. comp.</i>)	in each gr. vij. gr. iv. of Scam.

ALOES.

	now	contains
Colocynth Pills.	(<i>Pil. Aloes cum Colocynth.</i>)	in each Dram gr. xvi. of Aloes

JALAP.

	now	contains
Comp. Powder		
of Jalap.	(<i>Pulv. Jalap comp.</i>)	in each Dram ℥i. of Jalap.

PART II.

CLASSIFICATION

OF THE

PRINCIPAL* ARTICLES OF THE MATERIA MEDICA,

(ENUMERATED IN PART FIRST,)

ACCORDING TO THEIR MEDICAL QUALITIES.

CLASS I.

EMETICS,

1. MILD, *as*,

Bitters in an increased dose
Chamomile, Carduus, &c.
Ipecacuan
Wine of ditto
Antimonial Wine
White Vitriol
Oxymel of Squills
Syrup of ditto

2. DRASTIC, *as*,

Tartar emetic
Wine of ditto
Turpeth Mineral
Blue Vitriol

EMETICA.

1. MITIA, *ut*,

Amara fortia
Ipecacuan
Vin. ejusdem
Vinum antimoniale
Vitriolum album
Oxymel Scillarum
Syrup. Scillarum.

2. DRASTICA, *ut*,

Tartarus emeticus
Vin. è Tart. emetic.
Turpethum minerale
Vitriolum cœruleum, vel cuprum
vitriol.

* Some of the lesser classes are omitted, as *Errhines*, *Siala-*
gogues, being now disused in practice.

CLASS II.

PECTORALS,

PECTORALIA.

I. ATTENUANTS, *as*,I. ATTENUANTIA, *ut*,

Garlic (fresh and dried)
 Syrup of ditto
 Squills (fresh and dried)
 Vinegar of ditto
 Oxy-mel of ditto
 Syrup of ditto
 Pills of ditto
 Ground Ivy Infusion
 Decoction of Liquorice
 Extract of Liquorice
 Benjamin
 Flowers of ditto
 Tincture of ditto
 Gum Ammoniac
 Flowers of Sulphur
 Balsam of ditto

Allium
Syrup. Allii
Scilla
Acetum scilliticum
Oxymel scilliticum
Syrup. scilliticus
Pill. scillit.
Hederæ Terrestris Infus.
Infus. Glycyrrhizæ
Extr. ejusdem
Benzoinum
Flores Benzoini
Tinct. ejusdem
Ammoniacum Gum.
Flores Sulphuris
Balsam. ejusdem.

2. INCRASSANTS, *as*,2. INCRASSANTIA, *ut*,

Coltsfoot
 Tea and Syrup of ditto
 Marshmallow
 Decoction of ditto
 Syrup of ditto
 Gum Arabic
 Mucilage of ditto
 Emulsion of ditto
 Arabic Troches
 Lintseed Tea
 Spermaceti
 Express Oils, *as*,
 Oil of Sweet Almonds
 Opium

Tussilago
Infus. et Syrup. ejusdem.
Althæa
Decoct. ejusdem
Syrup. ejusdem
G. Arabicum
Mucilago ejusdem
Emulsio ejusdem
Trochisci Arabici
Infus. Sem. Lini
Spermaceti, vel Sebum Ceti
Olea expressa, ut,
Ol. Amygdal. dulcium
Opium.

CLASS III.

CATHARTICS.

CATHARTICA.

I. LAXATIVES.

I. LAXANTIA.

Acid Fruits, *as*,
Tamarinds
Cassia of the Cane
Electuary of ditto
Manna
Manna Whey
Syrup of Pale Roses
Ditto of Violets
Soap
Soap Pills
Cream of Tartar
Magnesia
Castor Oil
Flowers of Sulphur

Fructus acidi, ut,
Tamarandi
Cassia Fistularis
Elect. Diacassia
Manna
Serum Mannæ
Syrup. Rosar. Damascens.
Syrup Violarum
Sapo
Pil. Saponac.
Crem. Tartari
Magnesia alba
Ol. Ricini
Flores Sulphuris.

2. PURGATIVES, *as*,

2. PURGANTIA, *ut*,

Aloes
Aloetic Pills
Rufus' Pills
Aloetic Wine
Rhubarb
Stomachic Pills
Tincture of Rhubarb
Infusion of ditto
Wine of ditto
Bitter Tincture of ditto
Sweet Tincture of ditto
Sacred Elixir

Aloe
Pil. aloetic, vel ex Aloe
Pil. Rufi, vel Aloes cum Myrrha
Vin. aloetic
Rhæum
Pil. stomach.
Tinct. Rhæi
Infusio ejusdem
Vin. ejusdem
Tinct. Rhæi amar. vel T.
Rhubarb. C.
Tinct. Rhæi dulcis
Elixir sacrum, vel ex Aloe
et Rhæo

Senna
Infusion of Tamarinds with
Senna
Lenitive Electuary

Senna
Infus. Tamarind. cum Sennâ
Electuar lenitiv. vel è Sennâ

Elixir of Health	<i>Elix. salut. vel Tinct. Sennæ C.</i>
Jalap	<i>Jalapium</i>
Extract of ditto	<i>Extr. ejusdem</i>
Compound Powder of ditto	<i>Pulv. ejusdem comp.</i>
Jalap Pills	<i>Pil. è Jalap.</i>
Tincture of Jalap	<i>Tinct. Jalap.</i>
Syrup of Buckthorn	<i>Syrup. de Rhamno</i>
Bitter Cathartic Salt	<i>Sal Cathart. amar.</i>
Glauber's Salt	<i>Sal Glauberi, vel Soda Vitriol.</i>
Soluble Tartar	<i>Tartar solubile, vel Kali Tar-</i> <i>tarifat.</i>
Vitriolated Tartar	<i>Tartar vitriolatum, vel Kali</i> <i>Vitriolat.</i>
Polychrest Salt	<i>Sal Polychrest. idem</i>
Rochelle Salt	<i>Sal Rochelle, vel Soda Tartarif.</i>
3. DRASTICS, as,	3. DRASTICA, ut,
Colycinth	<i>Colycinthis</i>
Pills of ditto	<i>Pil. è Colocynth.</i>
Scammony	<i>Scammonium</i>
Compound Powder of ditto	<i>Pulv. Scamm. comp.</i>
Elaterium	<i>Elaterium</i>
Gamboge	<i>Gambogia</i>
Foxglove	<i>Digitalis</i>
Decoction of ditto	<i>Decoct. ejusdem</i>
Black Hellebore	<i>Melampodium</i>
Tincture of ditto	<i>Tinct. ejusdem</i>
White Hellebore	<i>Veratrum</i>
Tincture of ditto	<i>Tinct. ejusdem</i>
Hedge Hyssop	<i>Gratiola.</i>

CLASS IV.

ABSORBENTS.

ABSORBENTIA.

Crabs' Eyes	<i>Oculi Cancrorum</i>
Crabs' Claws	<i>Chelæ eorundem</i>
Prepared Chalk	<i>Creta præparata</i>
Coral	<i>Corallium</i>
Pearls	<i>Margaritæ</i>

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Magnesia	<i>Magnesia.</i>
Calcined Hartshorn	<i>Cornu Cervi calcinat.</i>
Quick-lime	<i>Calx viva.</i>
All Alkalis in a diluted state	<i>Alkalina mitia.</i>

CLASS V.

DIURETICS.

DIURETICA.

Juniper	<i>Juniperus</i>
Oil of ditto	<i>Ol. ejusdem</i>
Spirit of ditto	<i>Aq. composita ejusdem</i>
Garlic and its Preparations	<i>Allium et præparat.</i>
Burdock	<i>Bardana</i>
Decoction of ditto	<i>Decoct. ejusdem</i>
Squill and its Preparations	<i>Scilla et præparat.</i>
Wakerobin	<i>Arum</i>
Asarum	<i>Asarum</i>
Horse radish	<i>Raphan. rustic.</i>
Water of ditto	<i>Aq. ejusdem</i>
Seneka	<i>Seneka</i>
Decoction of ditto	<i>Decoct. ejusdem</i>
Nitre	<i>Nitrum vel Kali Nitrat.</i>
Salt of Tartar	<i>Sal Tartar. vel Aq. Kali</i>
Cream of ditto	<i>Cremor Tartar.</i>
Ammoniac Salt	<i>Sal Ammoniac.</i>
Spanish Flies	<i>Cantharides</i>
Tincture of ditto	<i>Tinct. ejusdem</i>
Syrup of Meadow Saffron	<i>Colchic. Syrup.</i>
Acids	<i>Acida</i>
Opium	<i>Opium.</i>

CLASS VI.

DIAPHORETICS.

DIAPHORETICA.

Saffron	<i>Crocus</i>
Tincture of ditto	<i>Tinct. ejusdem</i>
Counter-poison	<i>Contraeryva</i>

Compound Powd. of ditto	<i>Pulv. contrayer. comp.</i>
Guaiac	<i>Guaiacum</i>
Decoction of the Woods	<i>Decoct. Lignor</i>
Sarsaparilla	<i>Sarsaparilla</i>
Decoction of ditto	<i>Decoct. ejusdem</i>
Antimony	<i>Antimonium.</i>

CLASS VII.

SUDORIFICS.

SUDORIFICA.

Opium	<i>Opium</i>
Camphire	<i>Camphora</i>
Vinegar	<i>Acetum</i>
Volatile Alkali	<i>Alkali volatile</i>
Musk	<i>Moschus</i>
Snake root	<i>Serpentaria</i>
Tincture of ditto	<i>Tinct. ejusdem</i>
Neutral Salts, as,	<i>Sales medii, ut,</i>
Mindererus Spirit, &c.	<i>Sp. Mindereri, Aq. Ammon. Acetat. &c.</i>

CLASS IX.

CORROBORANTS.

ROBORANTIA.

I. ASTRINGENTS.

I. ASTRINGENTIA, ut,

Red Roses	<i>Rosæ rubræ</i>
Balaustine Flowers	<i>Flores Balaust.</i>
Tormentill	<i>Tormentilla</i>
Oak Bark	<i>Cort. Querci</i>
Logwood	<i>Lignum Campechense</i>
Galls	<i>Gallæ</i>
Japan Earth	<i>Catechu</i>
Dragon's Blood	<i>Sanguis Draconis</i>
Gum Kino	<i>Gum Kino</i>
Alum	<i>Alumen</i>

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Armenian and other Bolars	<i>Bolus Armena, &c.</i>
Earths	
Preparations of Iron	<i>Ferri præparat.</i>
Ditto of Copper	<i>Cupri eadem</i>
Ditto of Lead	<i>Saturni eadem</i>
Ditto of Zinc	<i>Zinci eadem.</i>

2. TONICS, as,

Gentian
 Lesser Centaury
 Quassia
 Simarouba
 Decoction of ditto
 Chamomile
 Wormwood
 Tincture of ditto
 Leopard's Bane.
 Decoction of ditto
 Peruvian Bark
 Angustura Bark

2. TONICA, ut,

Gentiana
Centaureum minus
Quassia
Simarouba
Decoct. ejusdem
Chamæmelum
Absinthium
Tinct. ejusdem
Arnica
Decoct. ejusdem
Cortex Peruvianus
 ——— *Angustur.*

CLASS IX.

STIMULANTS.

STIMULANTIA.

I. AROMATICS, as,

Peppermint
 Spearmint
 Lavender
 Lesser Cardamom
 Rosemary
 Cinnamon
 Cassia
 Cinnamon alba
 Cascarilla
 Wild Valerian
 Cinnamon
 Orange Bark
 Sweet-scented Flag
 Vol. IV.

I. AROMATICA, ut,

Mentha Piperitidis
 ——— *Sativa*
Lavendula
Cardamom. minus
Rosmarinus
Cinnamomum
Cassia
Canela alba
Cascarilla
Valeriana sylvestris
Coccinella
Cortex aurant.
Acorus.

2. PUNGENTS, *as*,

Mustard
Nutmeg
Clove
Mace
Ginger
Alcohol

2. PUNGENTIA, *ut*,

Sinapi
Myristica
Caryophylla aromatica
Macis
Zinziber
Alcohol.

3. BALSAMICS, *as*,

Turpentine
Canada Balsam
Capiwi Balsam
Peruvian ditto
Balsam of Tolu
Myrrh
Storax
Tar

3. BALSAMICA, *ut*,

Terebinthinæ
Balsam Canadense
—— *Copaibæ*
—— *Peruvian.*
—— *Toletan.*
Myrrha
Storax
Petreolum.

CLASS X.

DEOBSTRUENTS.

Borax
Madder
Soap
Mercury
Mezereon
Lobelia
Antimony

DEOBSTRUENTIA.

Borax
Rubia
Sapo
Mercurius, vel Hydrar.
Mezereon
Lobelia
Antimonium.

CLASS XI.

SEDATIVES.

Acids
Nitre
Opium
Hamlock

SEDANTIA.

Acida
Nitrum, vel Kali Nitrat.
Opium
Cicuta

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Deadly Night-shade
Henbane
Camphire

Belladonna
Hyosciamus
Camphora.

CLASS XII.

ANTISPASMODICS.

ANTISPASMODICA.

Amber
Asa-fœtida
Galbanum
Sagapen
Woodfoot
Æther
Castor
Musk
Volatile alkaline Salts

Succinum
Asa-fœtida
Galbanum
Sagapenum
Fuligo
Æther
Castoreum
Moschus
Sal. alkalina volatil.

CLASS XIII.

CARMINATIVES.

CARMINATIVA.

Coriander
Dill
Sweet Fennel
Caraway
Anise
Lesser Cardamom

Coriandrum
Anethum
Fœniculum dulce
Carvi
Anisum
Cardamomum minus.

CLASS XIV.

EMOLLIENTS.

EMOLLIENTIA.

Althea
Quince Seed
Linseed
White Lily

Althea
Sem. Cydonior.
Lini sem.
Lilium album

Express Oils	<i>Olea expressa</i>
Gum Arabic	<i>Gum. Arabicum</i>
Gum Tragacanth	— <i>Tragacanth.</i>
Starch	<i>Amylum</i>
Spermaceti	<i>Spermaceti</i>
Axunge	<i>Axungia, vel adep. suilla.</i>

CLASS XV.

ANTHILMINTICS.

ANTHILMINTICA.

Fœtids, as Rue, Tanfy, &c.	<i>Fœtida, ut Ruta, &c.</i>
Bitter and acrid Purgatives, as Rhubarb, &c.	<i>Amara et acrida Purgantia</i>
Tin	<i>Stannum</i>
Coweech	<i>Dolichos</i>
Cabbage-tree	<i>Geofræa</i>
Male Fern	<i>Filix mas</i>
Mercury, as Æthiops Mine- ral, &c.	<i>Hydrargyrus, ut Æthiops Mi- neral, Calomel, &c.</i>
Lime Water	<i>Aqua Calcis.</i>

CLASS XVI.

LITHONTHRIPTICS.

LITHONTRIPTICA.

Alkali, both mild and cau- stic	<i>Alkali caustic. et mite, vel Aqua Kali pur. et Aq. Kali</i>
Soap	<i>Sapo</i>
Lime-water	<i>Aqua Calcis</i>
Alkaline aerated Water	<i>Aqua alkalin. aerat.</i>
Wild Carrot	<i>Daucus sylvestris</i>
Bear's Whortleberry	<i>Uva Ursi</i>
Diuretics	<i>Diuretica.</i>

CLASS XVII.

REPELLENTS.

I. DISCUTIENTS, *as*,

Calamy
Zinc
Tutty
Lead
Mindererus Spirit
Vinegar

2. COSMETICS, *as*,

Balsam of Mecca
Issues

3. STYPTICS, *as*,

Agaric
Sponge
Styptic Powder
Actual Caution

REPELLENTIA.

I. DISCUTIENTIA, *ut*,

Lapis Calaminaris
Zincum
Tutia
Saturnum
Sp. Mindereri, vel Aq. Am-
mon Acetat.
Acetum.

COSMETICA, *ut*,

Balsam Mecca
Fonticuli.

STYPTICA, *ut*,

Agaric
Spengia
Pulv. Styptic.
Cauterium.

CLASS XVIII.

CAUSTICS.

I. INFLAMMANTS, *as*,

Pellitory
Mustard
Wake-robin
Garlic
Onion
Leek

CAUSTICA.

I. INFLAMMANTIA, *ut*,

Pyrethrum
Sinapi
Arum
Allium
Cepa
Porum.

2. VESICANTS, *as*,

Spanish Flies
Racunculus

2. VESICANTIA, *ut*,

Cantharides
Racunculus

3. CORROSIVES, *as*,

Arsenic
Quicklime
Concentrated Acids
Caustic
Common ditto
Blue Vitriol
Verdigrease

3. CORROSIVA, *ut*,

Arsenicum
Calx viva
Acida acerr.
Causticum acerrimum
——— *commune*
Vitriolum cœruleum vel Cupri
Ærugo Æris, vel Cuprum
Acetat.
Butyrum Antimonii, vel Anti-
mon. Muriat.





PART III.

EXTEMPORANEOUS PRESCRIPTION;

OR,

THE PRINCIPAL FORMS & REMEDIES

EMPLOYED IN

THE DISEASES OF INFANCY.

I. TREATMENT OF CHILDREN.

The treatment of children at birth depends on making the transition from the foetal state as slight as possible. This transition consists in

1. *Change of Atmosphere.*

To remedy this, the child should be wrapped up as warm as possible, and no other step taken for some time. It should then be washed with soap and water, lukewarm; but, in doing it, the skin should be no way fretted, and the exposure made for as short a time as possible.

2. *Change of Circulation.*

To render this as light as possible to the constitution of the child, no separation betwixt the mother and child should be made till the pulsation in the umbilical cord entirely ceases; and then the ligature may be passed, as directed Vol. III. p. 131, and the cord cut.

3. *Change of Nourishment.*

Milk alone should form the nourishment of the child, and nothing else should supply its place, nor be offered to it, till a proper supply fill the breast of the mother, or twenty-four hours after delivery, at which time the child's organs are also prepared to receive it.

The milk should also possess the proper proportion of its principles: its age should suit that of the child, and no other nourishment should be interposed till the end of the first month, when a little boiled bread may be added to it once a day, but no animal food should be permitted till the child is able to walk.

When the mother's milk is deficient, its flow may be assisted by much use of diluent or fluid diet; and with this view, also, a mixture of milk and beer has been particularly recommended. It is prepared by letting two parts of milk rise over a gentle fire, and adding to it one part of well-fermented beer previously boiled. It is to be taken cold.

When weaning takes place, the use of additional nourishment must be begun for some time previous to it; and the child is weaned by anointing the nipple with some disagreeable substance, as foot or aloes.

When the child is brought up by the hand, the same principles in the choice of the milk are to be studied as when reared by the mother.

The milk is given by means of a pot, or other instrument, in a lukewarm state. It should be prepared by mixing it with a little light animal jelly to render it less acrescent, and have also a proportion of sugar dissolved in it to increase its nourishing quality. This milk should be always taken from the same animal.

Where milk disagrees with children brought up in this way, weak beef or veal tea may be substituted occasionally in its place, or a soup composed of beer and the yolk of an egg. The beer must be vinous; the yolk of the egg must be mixed with a pint of the beer while boiling, and the remainder added when cold.

Whey is the best drink for children brought up by the hand; and it should be always made of milk from the same cow.

An earlier use of additional nourishment and of animal food should in general also be permitted here.

II. DISEASES OF CHILDREN.

In prescribing for children, the chief difficulty lies in fixing the appropriate dose; and hence medicines more frequently fail with

them, or are over-dosed, than with the adult. As a direction, therefore, it is proper to examine in a general manner the proportions fit for this early period of life.

Thus 7 years require half the dose of an adult.

3 years the fourth.

1 year the sixth.

1 month the tenth.

With these proportions in view, where no peculiarity of constitution exists, the doses stated will generally succeed.

The diseases of children to be judged of from the state of the fontanelle and skin.

Incomplete Animation.

Fainting removed by the use of volatiles; as

R. Laet. Asæfœtid. gutt. iv.

Aq. Font. ʒij. m.

A dose.

R. Tinct. Valerian. Sylvest. gutt. iv.

Aq. Ment. ʒij. m. ft. haust.

To be given every two hours.

Still-birth to be recovered,

1. By warmth, as covering the child with warm cloths, and using the warm bath.

2. By exciting the action of some principal organ, as blowing into the windpipe, inflating the lungs, and expelling it again by pressure on the breast; stimulating the nose and throat by means of a feather; injecting warm glysters, or of tobacco-smoke into the rectum; immersing the placenta in warm water, and forcing the blood into the circulation of the child; employing friction of the surface with stimulants, or striking the soles and nates.

The partial species or discolouration of the face and extremities treated by exciting action of surface by heat, and of the primæ viæ by vomiting or a glyster.

The application of a leech sometimes of use when congestion appears the cause.

Red Gum.

The red-gum is an efflorescence of spots, varying in their size and appearance, confined to the superior parts of the body, particularly the face, cheeks, and neck, fore arms, and back of the hands; but frequently extending also in its progress

over the whole skin. They are generally, though not always, preceded by some disorder of the system. They are commonly also attended with costiveness.

Treated,

1. By attention to the state of the skin or external surface, by preserving its proper temperature, and recalling the eruption, if suddenly repelled, by heat, particularly the semicupium, or warm bath.

2. By counteracting the internal acrimony which produces the eruption, by absorbents and laxatives ; as

℞ Pulv. Rhæi, gr. ij.
Magnet. alb. gr. iij. m. ft.
Pulv. laxans.

℞ Aq. distillat. ℥i.
Spt. Nuc. Moschat.
Syrup. Althæa, ā ℥i.
Magnet. alb. ℥i. m.

*A tea-spoonful a dose
twice a day.*

℞ Magnet. alb. ℥ij.
Cinhabar. fact. gr. xij. m. ft.
Pulv. subtil.

gr. v. to ℥i. a dose.

℞ Tartar. Emetic. gr. ½.
Magnet. alb. ℥i. m. ft. Pulv.

gr. v. a dose.

3. By removing uneasy symptoms, as sickness or depression, by cordials.

℞ Aq. Ammon. comp. ℥i.
Aq. distillat.
Syr. Caryophyll. ā ℥ij. m.

Two tea-spoonfuls a dose.

Retained Meconium.

An accumulation of the meconium, or bile, in a highly animalised state, precedes birth ; and, when not discharged after it, is productive of various complaints, as indigestion, flatulence, pain, &c. often ascribed to a different cause.

Removed by various laxatives ; as,

- ℞ Mannæ, ʒi. solve in
Aq. fervent. ʒff. *A dose.*
- ℞ Syrup. Rosæ pallid. ʒff. *A tea-spoonful a dose.*
- ℞ Syrup. de Rhamno.
Simpl. ā ʒij. m. *The same.*
- ℞ Ol. Ricini, ʒff. *The same.*
- ℞ Mellis, ʒi.
Seri Lact. ʒi. m. *Laxative Potion.*
- ℞ Ol. Amygdal.
Syrup. Rosæ,
Aq. distillat. ā ʒi. *Two or three tea-spoonfuls a dose occasionally.*
- ℞ Magnes. alb. gr. iv.
Rhuharb. gr. ij.
Sacchar. alb. gr. vi.
Ol. Anisi, gutt. i. ft. Pulv. *To be given at bed-time.*
- ℞ Sennæ, ʒi.
Prun. Gallic. N° 3, coque per horæ dimid. in
Aq. Cyath. *Three or four tea-spoonfuls every hour till it operates.*
- A glyster of milk and moist sugar may be given lukewarm.

Jaundice.

The icterus infantum is distinguished by the same yellow colour of the skin as in the adult, though in infants the nails are remarked to be free from its tinge. In its progress, when continuing some time, the yellow deepens, or changes to an orange colour.

Treated by an emetic, succeeded by a laxative; and, if prolonged, the use of saponaceous medicines.

The emetic most proper is ipecacuhana; as,

- ℞ Ipecacuhan. gr. iv.
Syrup. simpl. ʒij. m.

The laxative preferred is rhubarb ; as,

℞ Pulv. Rhæi, gr. iv.
Syrup. simpl. ʒij. m. ft. haust.

When not yielding to a repetition of this plan every two or three days, joined with the assistance of the warm bath and friction of the abdomen, saponaceous medicines necessary ; as,

℞ Aq. Kali, ʒij.

*From two to five drops
a dose in any liquid.*

℞ Sapon. alb.

A small bit to be dissolved in milk.

Rhæ.

The infantine erysipelas consists of blotches, various in their appearance, and rapid in their progress, acquiring soon a purplish or leaden hue, becoming exceedingly hard, and tending frequently to mortification.

Treated by the internal use of tonics, particularly the bark and aromatics ; as,

℞ Decoct. P. C. Peruv. ʒviij.
(Cort. ʒi. ad. Aq. lib. i.)

*A table-spoonful five
or six times a day.*

℞ Conf. Aromatic. ʒi.

*A little to be dissolved
in each spoonful of
the decoction.*

The best local applications are antiseptic lotions ; as,

℞ Spt. Vinos. camphorat.

*Compresses dipped in it
are to be first wrung
out, and then ap-
plied to the parts.*

℞ Aq. Lithargyr. Acetat.

The same.

Affection of the Nose.

The ozæna of infancy is distinguished by a discharge of matter from the nose, first purulent, and then sanious ; a purple-

streaked eye-lid towards its verge; a difficulty of breathing, particularly in sleep; and an external fullness of the throat and neck, discovering, on inspection internally, the tonsils tumified, of a dark red hue, with ash-coloured specks, frequently ulceration.

To be treated as the former disease, by tonic and antiseptic remedies; also,

\mathcal{R} Pulv. Contrayerv. comp. gr. iij. *To be taken in bark decoction.*

The local treatment, the proper position for the discharge of the matter, and the use of antiseptic washes; as,

\mathcal{R} Decoct. P. C. P.
Cum Acid. muriatic. gutt. aliquot.

Thrush.

The thrush is an eruption of spots, appearing generally about the third week, or within the month, on the lips and inside of the mouth, which continues to spread, and at times affects the whole of the alimentary canal, appearing externally at the anus.

Treated by counteracting the secretions of the primæ viæ, and by the exhibition of an antimonial emetic; as,

\mathcal{R} Antimon. Tartar. gr. i.
Aq. fervent. $\bar{\text{z}}$ ij. *A tea-spoonful a dose every three quarters of an hour, till vomiting ensues.*

Afterwards, the use of absorbents; as,

\mathcal{R} Pulv. Contrayerv. C. gr. iij.
 \mathcal{R} Julap. è Creta.
Aq. distillat. $\bar{\text{a}}$ $\bar{\text{z}}$ i. *A tea-spoonful often.*

When the scaling begins, purgatives then proper, as in p. 159; also,

\mathcal{R} Pulv. Scammon. cum Calomel. gr. i.
Rhæi, gr. iij. m. ft. Pulv.

The consequences of the disease to be repaired by tonics ; as,

℞ Infus. Chamæmel. ℥iv.
(Flor. ℥i. ad Aq. lb. i.) *A tea-spoonful twice or thrice
a day.*

℞ Tinct. Gentian. ℥ss. *Five drops a dose, twice a day,
in a little water.*

The local applications to the disease consist of astringents, in various forms ; as,

℞ Pulv. Boracis, ℥i.
Sacchar. alb. ℥viij. m. ft. Pulv. *A little to be put often
into the mouth.*

℞ Boracis, ℥ij.
Mellis, ℥i. m. ft. Elect. *The same.*

℞ Mellis, ℥ss.
Spt. Vitriol. vel
Spt. Salis Marin. gutt. ii. m. *The same.*

℞ Infus. Rosæ Rulræ, ℥ij.
Mellis, ℥ij. m. *The same.*

Excoriations of anus removed by sedative washes ; as,

℞ Extract. Goulard.
Vin. Gallic. ā gutt. xxx.
Aq. Font. ℥iv. *The parts to be bathed with this once
or twice a day.*

Skin-bound.

The disease termed Skin-bound is a peculiar affection, displayed in a yellowish-white colour of skin, its tightness or fixed state to the parts below, and its hard resisting feel, particularly on the face and extremities. To these symptoms are joined coldness of the child, its apparent pain, and death-like appearance.

The external treatment lies in the use of the warm bath, rendered stimulant by a solution of salt and soap ; in friction, and blisters.

The internal, in the previous exhibition of a laxative, as in p. 227; and then carminatives and antispasmodics; as,

℞ Pulv. Rhæi, gr. xv.
Magnet. alb. ʒss.
Aq. Fœnicul. dulc.
Anethi, ā ʒvi.
Syrup. Rosæ pallid. ʒss.
Spt. Ammon. comp. gutt. xxx. m.

Two or three spoonfuls a dose, twice or thrice a day.

℞ Aq. Menth. Pip.
Rosæ, ā ʒi.
Spt. C. C.
Tinct. Valerian. Sylvest. volat. ā ʒi.
Syrup. simpl. ʒss. m.

The same.

Convulsions.

The convulsions of children are generally preceded by slight symptoms of distortion of the face; as, involuntary laughter when asleep or awake, squinting of the eyes towards the nose, or turning them upwards, the child, at the same time, changing to a blueish colour. The fit itself is distinguished by distortions, more or less general according to the violence of the attack. These distortions are either of the members in succession, or of the body all at once. They are attended with the usual symptoms of froth or frothy discharge from the mouth; and they are terminated by profound sleep, from which the child awakes unconscious of its former state.

The treatment depends on the particular cause of irritation.

The lock-jaw treated by cleaning out the primæ viæ, by injection or laxatives, as in p. 227, so as to remove the meconium.

The spasm of the part to be then attacked by the warm bath, by local stimulants, along with friction and blisters; as,

℞ Ol. camphorat. ʒi.

A little to be rubbed on the parts.

℞ Balsam. Anodyn. ʒi.

The same.

The use of tonic and stimulant medicines proper during this treatment; as,

℞ Julep. Moschat. ʒij.
Aq. distillat. ʒi.℥. M.

A tea spoonful often.

℞ Aq. Menth. Pip. ℥ss.
 distillat. ℥i.
 Ol. Succini, gutt. iv.
 Sal Volat. gutt. ij.
 Syrup. simpl. ℥ss. M.

A tea spoonful often.

℞ Aq. Fœnicul. dulc.
 Syrup. simpl. ā ℥i. ss.
 L. L. gutt. x.
 Moschi, gr. ij. M.

The same.

Also wine, diluted spirits, and other cordials, are proper.

Inward Fits.

The symptoms which distinguish this second form of early convulsions, termed inward fits, are, a little blueness of the lips, slight turning up the eyes, and a peculiar sound of voice, with quick intervals of breathing.

Treated by the exhibition of an emetic, as in p. 273, and afterwards the use of volatile and foetid medicines, as in the former disease; also,

℞ Ol. Succini, gutt. vi.
 Tinct. Asæ foetid. gutt. xxx.
 Syr. simpl.
 Lac Amygdal. ā ℥ij. M.

A tea-spoonful often.

℞ G. Asæ foetid. ℥ss.
 Solve in Aq. Cinn.
 Font. ā ℥iv.
 Tinct. Valerian. volat. ℥i. ss. M.

The same.

Abdominal Complaints.

The chief abdominal complaints that attend infancy are wind and costiveness; and these complaints assume various symptoms, from simple griping pain and crying, drawing-up the legs and scrotum to the height of actual spasm, and convulsions.

The use of laxatives, combined with aromatics, the proper remedies; as,

R Tinct. Aloes comp. ʒij. *From five to ten drops a dose, in any liquid.*

R Pulv. Sennæ, gr. ij.
Zinziber. gr. i. to v. Pulv. *To be given in pap.*

R Magnes. alb. gr. iv.
Aq. Anethi, ʒij.
Syrup. Rosæ, ʒi. M. ft. haust. Laxans.

R Pulv. Rhæi, gr. xii.
Magnes. gr. viij.
Tinct. Rhæi, ʒi.
Syrup. Papaver. ʒij.
Aq. Menth. ʒi. M. *Two or three tea-spoonfuls a dose every four hours.*

R Ol. Ricini, ʒij
Mucilag. G. Arabic.
Syrup. Mannæ, ā ʒi.
Spt. Ammon. Comp. gutt. x. M. *Two tea spoonfuls a dose.*

Where these laxatives are not sufficient, a suppository may be used to remove costiveness; or, instead of it, some of the drastic purgatives; after which, the former remedies will be sufficient.

The best purgative is a glyster of milk, in which 20 grains of aloes are dissolved.

When wind is the chief symptom of uneasiness, external heat, either dry, or by fomentation, affords the quickest relief.

Attention to the food necessary, to prevent a relapse.

Watchfulness.

To be treated as arising from the former complaints, or by a proper regulation of the child, in regard to the times of sleep.

Vomiting,

In children, is seldom an idiopathic disease; it is generally a consequence of some other morbid state.

When from repletion, no treatment necessary.

When from disease, to be treated according to the particular case.

Thus, when the four smell, or green clayey stools, mark predominant acidity, absorbents the proper remedy; as,

R_x Magnes. alb. ℥ij. *A little to be mixed with the food, and given often.*

As also the alkaline preparations in p. 274.

When from morbid irritability, tonics are then indicated; as,

R_x Infus. C. Peruv. ℥iv.
(℥i. to ℥iv.) *A tea spoonful or two a dose.*

R_x Flor. Chamæmel. ℥i.
Cort. Aurant. gr. x.
Pulv. Zinziber. gr. v.
Infunde in Aq. ℥v. et cola. *The same.*

Or external applications of the same kind; as,

R_x Balsam. Anodyn. *A little to be rubbed on the pit of the stomach.*

R_x Spirit. Vinos. Camphorat. *The same.*

R_x Emplast. Labdani, ℥ss.
Theraic. ℥i. m. ft. Emplast. *To be applied on the region of the stomach.*

R_x G. Mastic.
Stor. Calamin.
Pulv. Nuc. Fr. Myristicæ
Ol. Myrti.
Flor. Balauft. ā ℥i.
Ceræ et Terebinth. ā q. s. ut ft. Emplast.
alut. extens.

R_x Ungt. Simpl. ℥ij.
Ol. Macis.
Rosmarin. ā ℥ss.
Balsam. Peruv. ℥ij. m. ft. Ungt. *With a little of which the region of the stomach is to be frequently anointed, and then covered with warm flannel.*

When from suppressed eruption, marked by the presence of

general fever, it is to be recalled by means of the warm bath, the application of friction after it, and a blister or warm plaster to the region of the stomach, with the proper use of cordials.

When from interrupted discharge, the return of the latter is to be solicited by some irritating application.

Inflammation of Stomach.

The gastritis infantum is a rare disease, and distinguished by great pain in the region of the stomach, very frequent in its recurrence, and marked by violent contortions or writhings, and the application of the child's hand to the part.

Treated by cooling laxatives, as in p. 227.

When more severe by blisters to the part, by fomentations, and the warm bath.

Gripes

Are treated as abdominal complaints, p. 273.

Looseness.

Diarrhoea is one of the most frequent complaints of infancy, and one which, unless severe, is hardly to be considered in children as a real morbid state. By it, nature, with them, most commonly throws off any offending cause. Its causes, therefore, and treatment, require very particular attention.

To be treated according to the particular indication arising from the appearance of the discharge, and the cure to be always premised by an emetic, as in p. 227.

When the discharge indicates predominant acidity, rhubarb and absorbents the chief means of cure, with an occasional anodyne.

℞ Pulv. Rhæi, gr. xv.

Cret. alb. ℥i.

Sacchar. alb. ℥i.

Aq. Menth.

Font. ā ℥i. ff. m.

Two tea spoonfuls a dose.

℞ Pulv. Cret. alb. ℥ij.

Conf. Japonic. ℥i.

Sacchar. alb. ℥i.

Aq. Anethi, ℥ij. m.

The same.

℞ Vin. Rhæi, gutt. x.
 Tinct. Opii, gutt. ij.
 Aq. Cinn.
 Syr. Simpl. ā ʒi. m. fiat haust.

When stool slimy, alkalies required, as in p. 228.

When watery, bloody, and dysenteric, a smart purge should premise, as in p. 227; and then cordials and glysters of warm milk and demulcents succeed.

Dentile diarrhœa demands a difference in the treatment, though the cure depends on the operation or protrusion of the teeth.

Watery gripes, or infantile dysentery, is more obstinate in its effects.

An emetic should be premised here in a full dose, followed by a laxative; and the rest of the treatment to be varied according to the particular symptoms.

If symptoms mild, the cure then is to be trusted to small doses of ipecacuan or antimony; as,

℞ Pulv. Ipecacuan. gr. i.
 Magnel. alb. gr. xvi.
 Pulv. Aromat. gr. vi. m. et divid. in dos. viij. *One every four hours.*

℞ Vin. Antimon. gutt. xij.
 Aq. Cinn.
 Syrup. Cois, ā ʒij. m. *A tea-spoonful a dose every four hours.*

If a predominant acidity seems to continue the irritation alkalies then proper, as in p. 226; also,

℞ Tinct. Myrrh.
 Spt. Ammon. fuccinat. ā ʒij. m. *Five drops a dose, in any liquid.*

℞ Sapon. Venet. ʒij.
 Margarit. preparat. ʒi.
 Chel. Cancr. ʒi. ff.
 Syrup. Althææ, ʒff.
 Aq. Menth.
 Anethi, ā ʒij. m. *A large tea-spoonful every six or eight hours.*

When weakness, not irritation, occurs to keep up the discharge, astringents, tonics, and anodynes then proper; as,

- ℞ Balsam. Locatelli, ℥i.
 Conserv. Rosæ rubræ, ℥ij. m. *The size of a bean a dose,
 three or four times a day.*
- ℞ Decoct. Lign. Campechenf. ℥viiij. *A table-spoonful a dose.*
- ℞ Amyli, ℥i.
 Aq. Cinn. f. ℥ss.
 Tinct. Opii, gutt. v.
 Sacchar. alb. ℥ij. m. ft. haust.
- ℞ Ennema ex Amylo.
 Cum L. L.

External applications are also here employed; as,

- ℞ Axung. Anserin. ℥ij.
 Ol. Macis. ℥i.
 Menth. Sativ. ℥i.
 Bacc. Juniper.
 Chamæmel. ā ℥ss. m. ft. Liniment. *The region of the sto-
 mach and umbilicus
 to be frequently a-
 nointed with it.*
- ℞ Theriac. Venet. ℥i.
 Ol. Macis. ℥ij.
 Ol. Myristic. gutt. iij. m. et ft. emplast.

Incontinence of Stools.

Palliated by cold affusion till the parts acquire strength.

Worms.

The symptoms enumerated as distinguishing worms are, pain and acid eructation of stomach, variable appetite, foul tongue, fœtid breath: the belly full, hard, and tense, with occasional gripings or pains in different parts of it, particularly about the navel; irregular state of the belly, heat and itchiness of the rectum, urine white and limpid, often discharged with difficulty. With these symptoms are joined a dull appearance of the eye, often dilation of the pupil, itchiness of the nostrils, short dry cough, slow fever, with evening exacerbations, and irregular pulse, grinding of the teeth in sleep, &c.

Their treatment depends on effecting their expulsion, and preventing their future generation.

The first accomplished by means of the different medicines detailed in vol. I. p. 341. Also,

℞ Hydrargyr. cum Sulphur. ℥i.

Pulv. Rhæi, Div. m. et divid. in dose No. 28.

One twice a day.

℞ Hydrargyr. cum Cretâ,

Magnet. alb. ā gr. vi. m. ft. Pulv. *To be taken at bed-time.*

℞ Limatur. Stanni, ℥ij.

Hydrargyr. ℥iij. m. ft. Amalgam.

℞ Hujus Amalgam. gr. viij.

Pulv. Rhæi, gr. iv.

Calc. Antimon. illot. gr. iij.

Mellis, q. s. ut ft. Bolus.

To be taken every morning.

℞ Pulv. Rubig. Ferri, gr. v.

Sacchar. alb. gr. x. m.

℞ Auri Musiv. Div.

*To be taken twice a day in
any convenient vehicle.*

*To be followed by a purge
every fourth or fifth day.*

External applications are also favourite remedies for worms;
as,

℞ Aloes Succot.

Pulv. Flor. Chamæmel. ā ℥i.

Terebinth. Venet. q. s. ut ft.

Emplast.

*To be applied to the region
of the navel.*

℞ Fel. Bovin.

Aloes, ā ℥i.

Axung. ℥i. m. ft. Linim.

*The parts below the navel
to be anointed with it
twice or thrice a week.*

Convulsions.

The appearance of infantine convulsion differs nothing from that which attacks the adult. The body becomes either convulsed

all at once, or the limbs; the jaws are locked, and the mouth filled with slime. In this state the child continues till sleep supervenes, from which it awakes pretty well, till the same appearances are renewed at intervals of various distance. It is divided into two species, the symptomatic and idiopathic.

Symptomatic.

When from state of the primæ viæ, or adhesive nature of the food, its treatment depends on change of diet and the use of laxatives, particularly the castor oil, as in p. 273.

When from teething, the protrusion should be hastened by scarification.

When from retropelled eruption, the warm bath useful, and soliciting a discharge by blisters.

When from worms, the remedies to be employed detailed in that disease, vol. I. p. 341.

Idiopathic.

The treatment here consists in the most powerful means of removing general irritation, by blood-letting, by leeches to the foot or behind the ears, by blisters, and by proper exhibition of laxatives.

When symptoms still continuing, antispasmodics then indicated, as in p. 232. Also,

R. Aq. distillat. ℥ij.
Tinct. Valerian. volat.
Spt. Ammon. fœtid. ā 3℥.
Castor. Russic. ℥i.
Sacchar. alb. 3ij. m.

A tea-spoonful a dose.

R. Aq. Font. 3ij.
Tinct. Fuligin.
Valerian. volat. ā 3℥.
Syrup. simpl. 3℥. m.

The same.

R. Castor. ℥i.
Sal. C. C. gr. viij.
Aq. Cinn.
Font. ā 3i. ℥.
Conf. Damocrat. ℥i. m.

R_x Mucilag. G. Arabic. ℥i. ff.
 Syrup. simpl. ℥ij.
 Ol. Anisi.

Rutæ, ā gutt. iv. m.

The same.

R_x Spermaceti, (v. o. f.) ℥i.
 Aq. distillat. ℥ij.
 Syrup. Toletan. ℥ff.
 Ol. Anisi, gutt. xii. m.

R_x Moschi, gr. x.
 Aq. distillat. ℥ij.
 Syrup. Zinziber. ℥i. m.

External applications are also employed with the same view ;

as,

R_x Balsam. Anodyn. ℥ff.
 Ol. Macis, ℥i.
 Ol. Menth. ℥i. et ft. Ungt.

*With which the back-bone,
 palms of the hands, and
 soles of the feet, are to
 be anointed.*

R_x Ol. Oliv. ℥i.
 Ol. Succini, gutt. xxx.
 Ol. Terebinth. ℥i. m. ft. Liniment.

Where convulsions assume a chronic form, an issue then proper ; with the use of tonics, particularly chalybeates, in the form of a mineral water.

Palsy

Is a rare disease in children : it does, however, occur at times, and that in different degrees, the same as in adults.

The treatment requires particular attention to the state of the primæ viæ, as in p. 227 ; afterwards the use of antispasmodics, internal and external, as in the former disease, or electricity.

When connected with hydrocephalus, the treatment of this last forms the primary indication.

Epilepsy

Consists in the child suddenly and unconsciously falling down ; when convulsion takes place, either with or without the loss of the senses.

The treatment the same as in convulsions; by first removing irritation of the primæ viæ, by laxatives, and afterwards the use of tonics and antispasmodics.

St. Vitus's Dance.

This disease consists of partial convulsions, or continual motion, of the extremities of one side, seldom extending its attacks beyond the fifteenth year. Its causes are, generally, predominant irritation in the primæ viæ, of various kinds, or else general relaxation of the system.

To be treated as in the former disease, by attention to the first passages and the use of tonics.

Night-mare

Is an affection well known: it consists of a sense of oppression, weight, and tendency to suffocation, varying in its period of duration, and also in the degree to which it attains. It is an affection common to children as well as adults; and it can hardly be deemed a disease, as they frequently outgrow it. The fit, however short in duration, always leaves some unpleasant effects, as lightness of head, tremor, and anxiety; but these are merely temporary.

Treated by avoiding flatulent diet, and rousing from the fit by volatile and foetid medicines, as in the former diseases. The cold bath and tonics are proper preventatives.

Temporary Loss of Speech,

A difficulty in utterance, is frequent with some children, from the fourth to the seventh year. It forms in its attack only a temporary inconvenience, seldom exceeding a quarter of an hour at a time.

To be treated as the other convulsive disorders described.

Excoriations of Skin.

Excoriations of different parts of the cuticular surface, either from its delicacy or particular causes of irritation, is a common complaint of children; but the part most liable to this, and requiring often a special treatment, is behind the ears.

Simple excoriation requires only cold washing or affusion, and the application of some mild astringent, as the fingered rag.

The ulcerated species to be treated first by absorbent laxatives as in p. 226; afterwards by some alterative preparation of mercury, as

℞ Hydrargyr. cum Sulphur. gr. v. for a dose

℞ Calomel. gr. i.
Pulv. Rhæi, gr. ij. m. ft. Pulv. The same.

To the part itself the same applications may be made; as,

℞ Calomel. ʒi.
Ungt. Sambuc. ʒi. m. ft. Ungt.

Blisters occasionally useful in the neighbourhood.

Auricular Abscess.

Matter discharged from the ears in various quantities, and attended with various appearances of inflammation, both in degree and extent, are common to childhood.

To be treated by obviating inflammation, by the use of laxatives, as in p. 227, and giving a discharge to the matter; afterwards using astringent washes, as in vol. II. p. 413; and, if ineffectual, having recourse to warm stimulants, as in vol. I. p. 34 and vol. II. p. 440.

℞ Ol. Amygdal. ʒff.
Camphor. ʒi. A little to be dropped into the ear.

℞ Ol. Amygdal. ʒff.
Spt. Lavend. C.
Tinct. Castor. a gutt. xxx. m.

℞ Aq. Lithargyr. acetat. gutt. x.
 Spt. Camphorat. gutt. xx.
 Aq. distillat. ℥viij. m. ft. inject.

When resisting this treatment, mercurial alteratives to be given, as in the former affection, an issue opened near it, and purgatives employed to the part.

Fevers.

The fevers of infants are generally symptomatic, and not such as occur in the adult.

-Catarrhal Fever

Is distinguished by cough, hoarseness, and difficulty of breathing, with affection of the nose and eyes, only varying from the catarrh in the adult by the violence of its symptoms.

The treatment consists in lessening the irritation on the breast by blood-letting, by a leech or two to the foot, followed by the application of a blister to the region of the stomach.

If much phlegm, an emetic may then be exhibited, as in p. 227.

The use of oily medicines will quiet the irritation of the cough; as,

℞ Ol. Amygdal.
 Syrup. Violar. ā ℥i.
 Spermaceti, ℥i. m.

A tea-spoonful a dose often.

℞ Pulv. Tragacanth. comp.
 Spermaceti, ā ℥i.
 Syrup. simpl. ℥ij. m.

The same.

℞ Syrup. Papaver. ℥i.

The same.

The bowels, in the progress, to be kept open by laxatives, as p. 227.

Stomachic Fever.

The leading indication here is the exhibition of an emetic, when relief of all the symptoms will follow.

Intestinal Fever.

To be treated in the same way, followed by laxatives, either absorbents, as in p. 226; or drastics, as in p. 227, according to circumstances.

When fever protracted, saline draughts, with antimonials proper, as in vol. I. p. 274, and afterwards the bark.

Consequences of Fever.

The appearance of eruption must be left to time.

Cervical pain and tumor yield to heat and embrocations, as in p. 229.

Intermittent Fever.

Its symptoms are the same as in the adult, consisting in a regular succession of cold, hot, and sweating fits, with the intermission of a certain period before their repetition; and this intermission is chiefly distinguished by a high-coloured urine, with a lateritious or red sediment.

To be treated in the same way as in the adult, vol. I. p. 274.

First premising an emetic, then continuing mild diaphoretics for some time, as in p. 98, and afterwards throwing in the bark, as in vol. I. p. 340.

The bark often employed externally here, as by poultice to the stomach, or quilted in a waistcoat.

Ague-cake, if forming, to be treated as in the adult, vol. I. p. 327.

Dentition.

The symptoms that mark dentition are—

1. A tendency to drivell or slaver much, with starting, and thrusting the fingers into the mouth.
2. Expansion, heat, and swelling of gum.
3. A circumscribed red or hectic flush on the cheek.
4. Eruptions on the face and scalp.
5. Diarrhoea, with its usual irritation, or griping and morbid stools.

6. Spasms, and general irritation of the nervous system, preventing sleep.
7. Alteration in the secretion and appearance of the urine; and,
8. Sometimes swelling of the extremities, though rare.

The morbid states then requiring relief are the dentile fever and convulsion.

The dentile fever treated by dilution and keeping up diarrhoea by laxatives, as in p. 227, or by small doses of antimonials.

In retention of urine, clysters and the warm bath necessary.

Where diarrhoea spontaneous and excessive, to be restrained by the testacea, joined with compound spirit of ammonia or laudanum.

The Dentile Convulsion.

Treated in the same manner as fever, along with the application of blisters behind the ears or to the back; but the most certain relief arises from the operation.

Inflamed and ulcerated gums, during dentition, to be treated by cooling sedative applications; as honey sharpened with a little weak vitriolic acid, syrup of white poppies; or, failing these, astringent applications are to be made, as employed under the head canker.

Mumps.

The mumps are a swelling of the neck and throat, or the parotid and maxillary glands, from the appearance of which the name is derived; attended with respiration and deglutition little impeded, and inflammatory fever generally slow.

To be treated by mild diaphoretics, as in vol. I. p. 274, and an occasional laxative, as in p. 227.

Consequences of the disease, or chronic swelling of the part, to be obviated as in vol. II. pp. 429 and 435.

Croup.

Croup is a disease formerly treated of, vol. I. p. 15. Its symptoms are, a sharp shrill cough, with stridulous noise; laborious or

wheezing respiration; flushed face, increased to lividity during each paroxysm; little external swelling, and general fever.

Treatment as in vol. I. p. 282.

A more modern practice is, the use of opium and emetics.

The Tinct. Opii is given in doses of six or eight drops, every two hours, till a remission of the spasm takes place; and an emetic, exhibited daily, to prevent the accumulation of phlegm.

Symptomatic coughs cannot be disjoined, in their treatment, from that of the disease with which they are connected.

Chin-cough.

The chin-cough, or hooping-cough, is a contagious disease, attacking in paroxysms of a convulsive suffocating cough, with loud noise or hoop at each respiration, and generally terminating by vomiting.

Treatment depends on the state of the system, or the tendency to inflammation or spasm.

In the first, bleeding and blisters become necessary, with the use of mild diaphoretics, as in vol. I. p. 274; and an occasional laxative, as in p. 227.

In the second, emetics and antispasmodics form the chief remedies, as in p. 240; also,

℞ Antimon. Tartar. gr. ij.
Crystall. Tartar. gr. v.
Aq. distillat. ℥v. m.

A tea-spoonful every half hour.

Where cough very troublesome, an opiate useful, particularly the cicuta; as,

℞ Lact. Ammoniac. ℥iv.
Extract. Cicut. gr. ij. m.

A table-spoonful a dose.

℞ Julep. è Moscho. ℥vi.
Tinct. Opii camphorat. ℥ss.
Tinct. Valerian. volat. ℥i.

Two tea-spoonfuls thrice a day.

℞ Lact. Ammon.
Aq. Cinn. ten. ā ℥ij.
Tinct. Castor. ℥ij.
Syr. Balsam. ℥ss. m.

The same.

External antispasmodics are also employed here; as, rubbing the hands and soles with spirit of ammonia; oil of mace, or amber, to the spine and pit of the stomach; anointing the soles with ointment of garlic and hogs'-lard.

The recurrence of the disease is cut short by an emetic, and a return to the use of antispasmodics.

Change of air and milk diet are proper additions to the treatment.

Common Spasmodic Cough.

This complaint is marked by the same appearance of cough as chin-cough; but no fever attends it. It differs also from catarrh in the absence of the catarrhal symptoms, and also in antiphlogistic remedies having no effect.

Its treatment requires simply the use of antispasmodics.

Cutaneous Diseases.

Rash.

The most common seat of rash is the face, neck, and breast: its appearance is most common about the decline of summer, or the months of August and September: it is equally sudden in its eruption and departure. A little sickness is apt to arise when this last takes place, but it is merely temporary.

Attention to the primæ viæ the only treatment required; and, where costiveness prevails, laxatives employed, as in p. 227.

Bastard Itch.

Bastard itch is an eruption affecting the face with watery-headed vesicles and foul blotches, resembling, in its appearance, the common itch or psoa: it is chiefly peculiar to the period of teething, and the decline of acute febrile or intestinal complaints.

Treatment, avoiding cold, and the same medicines as in rash.

Milk Blotches.

The crusta lactea, or milk blotches, is an eruption of white vesicles, which assume a dark colour, resembling the blackening

of the small-pox, and are succeeded by scabs producing an ichory matter, attended with considerable itchiness.

To be treated by some sulphureous mineral, or an infusion of the viola tricolor.

R Pulv. Violæ, 3i. coque in
Lact. lb. i. ff. ad lb. i.

*To be taken in the course
of the day.*

Anomalous Eruption.

Anomalous eruptions, during the time of teething, are so various in their appearance, that no certain description can be given of them.

Their treatment consists in moderating fever, if present, by mild diaphoretics, as in vol. I. p. 274; and attention to the primæ viæ.

Nettle-rash.

This is a rash affecting the breast and lower limbs, with an appearance resembling the stinging of nettles.

Its management requires some mild sudorific, as in vol. I. p. 274, and regulating the state of the primæ viæ.

Phlyctenæ.

Phlyctenæ consist of vesications or blisters similar to burns, varying in their size and the period of their continuance, which is generally some days. They contain an acrid lymph when opened.

The use of absorbents indicated, as in p. 226.

Scorbutic Eruption.

This is an eruption which discharges a thin sharp ichor, and infects the face and neck, attended with excoriation wherever it touches.

Treatment difficult. The water-parsnip reckoned specific, with attention to the state of the primæ viæ.

℞ Succ. Sii, Aquat. lb. i.

A spoonful four or five times a day in milk.

Grocer's Itch.

This eruption appears in some parts like the points of pins, with watery heads; at other times as large as peas, which do not itch or feel sore. But it appears also frequently in foul blotches, which degenerate into scabby sores.

Its treatment by mercurial alteratives, as in vol. I. p. 345, and vol. IV. p. 242; and externally by the same applications; as,

℞ Ungt. Hydrar. Niträt.
Sulphur. ʒ ʒss.

To be applied to the sores.

Ring-worm.

A species of herpes, or broad ring-worm, is very apt to affect those parts of the child that are fretted by its dress. The skin exhibits a very inflamed appearance, without much pain.

To be treated as phlyctenæ.

Small-pox.

The small-pox is a fever generally of the inflammatory or typhoid species, attended with a local inflammation and pain of particular separate points of the internal and external surface, forming an eruption. The appearance of this eruption is from the third to the seventh day of the fever, terminating in eight days from this appearance by the falling off of crusts, which leave a pit or mark behind.

To be treated as in vol. I. p. 293; and also, when bark used in confluent kind.

℞ Cinchonæ in Pulv. trit. ʒiij. ss.
Myrrh. in Pulv. ʒss.
Spt. Vin. ten. lb. i. degere et cola.

A tea-spoonful thrice a day, with the addition of ten drops of diluted vitriolic acid.

℞ Cinchonæ,
 Flav. Pulv. crass. ℥ss.
 Rosar. rubr. exsiccat. 3ij.
 Aq. fervent. ℥xij.
 Macera et cola,
 Infus. ℥vij. adde
 Acid. Vitriol. dilut. 3i. m.

A cupful every four hours.

℞ Decoct. Peruvian. 3i. ss.
 Spt. Cinn. 3i. ss.
 Acid. Vitriol. dilut. gutt. x.
 Syrup. Croci, 3i.
 Tinct. Opii, gutt. iv. m. ft. haust.

Measles.

The measles are a continued inflammatory fever, attended with an eruption in the form of clusters, little prominent, and resembling flea-bites, marked by a vivid redness, gradually decreasing till desquamation ensues.

To be treated as in vol. I. p. 293.

Chicken-pox.

The chicken-pox resembles the small-pox somewhat in its general appearance; but it differs from it in its symptoms, in its progress, and in its duration.

Requires no special treatment but a laxative.

Scarlet Fever.

The scarlet fever, in infancy, is for the most part of the typhoid form, with or without an affection of the throat, and always marked by a rosy efflorescence of the skin.

To be treated, when of the mild kind, as in vol. I. p. 274. When showing a putrid tendency, bark and acids to be exhibited, as in confluent small-pox, vol. I. p. 293.

Antiseptic gargles also to be used, as in vol. I. p. 319.

Miliary Fever.

The miliary fever is a disease rarely attacking children, unless epidemic; and then it is distinguished by the usual symptoms, as in other cases.

To be treated as in vol. I. p. 274.

Scald-Head.

Tinea consists of a scaly eruption of the skin of the head or hairy scalp. It is attended with various degrees of acrimony, and becomes accordingly more or less infectious in its nature.

The preliminary step—shaving the head, or cutting the hair close; and the bathing the head with soap and water, or cream and honey, or with the following fomentation:

℞ Fol. Absinthii,
Abrotan. ā ʒi. coque in
Aq. Font. lb. iv. ad. lb. i. ft. adde
Spt. Camphorat.
Aq. Kali, ā ʒij. m.

℞ Infus. Nicotianæ.

To be afterwards cured chiefly by topical applications, as in vol. I. p. 346. Also,

℞ Ungt. Sulphur.
Hydrargyr. ā ʒff. m. *A little to be rubbed in every night.*

℞ Ungt. Nicotianæ, ʒi.
Petreol. Barbad. ʒff.
Balsam. Peruv. ʒi. m. ft. Ungt.

℞ Ungt. è Pice, ʒi.
Pulv. Hellebor. alb. ʒi. m. ft. Ungt.

℞ ʒ corrosiv. sublimat. gr. x.
Aq. distillat. lb. i. m.

Wash for the sores.

Rx Flor. Sulphur.

Pulv. Sinapi.

Staphesa-griæ, \bar{a} 3i.

Axung. Porcin. 3i. m. ft. Ungt.

When the disease is obstinate, internal alteratives may be proper, as a grain of calomel every night, or a dose of Æthiop's mineral washed down with the decoction of wood, as in p. 158, or lime-water. An issue in the neck will be also useful.

Itch:

This disease we already considered in vol. I. p. 221: it is chiefly introduced here to remark some peculiarities in its treatment in infancy.

To be treated as in vol. I. p. 345.

Shingles.

The herpes, or shingles, is of two kinds; the miliaris, or ring-worm, and the exedens.

The miliary kind is to be treated chiefly by stimulating and astringent applications, as ink thickened with mustard flour, spirit of wine, and saturnine or zinc lotions, as in vol. II. p. 413. Of ointments, the nitrated mercury is best.

The eating or ulcerous herpes is to be attacked by internal remedies, as in vol. I. p. 220.

The external applications are the same as in the former species; and, when obstinate, caustics may be occasionally proper.

Venereal Disease.

The lues of infancy we find generally displays itself first about the genitals and nates; more rarely it attacks the face, breast, and lower extremities. Its appearance in these situations is first in the form of copper-coloured pustules, similar to what distinguish the second stage of the constitutional disease in the adult. These pustules spread, and the body is covered with an appearance from them of what are commonly named *scorbutic spots*. Instead of pustules, however, it is frequently ob-

served in the form of livid blotches. Whichever of these appearances it assumes, it continues to spread about the face, eyebrows, chin, &c. having the same appearance as when recovering from the confluent small-pox. The mouth also comes internally to be affected, and here it displays an appearance similar to aphthæ. These change into sores, and gradually spread backwards to the fauces, and forwards to the lips and nostrils, occasioning stoppage of the nose, difficulty of breathing, and other symptoms attending an impeded action of these parts. The nurse's nipples then begin to turn raw, and to assume the appearance of chancre; and in this way the disease is transmitted from the child. With time, the body of the child becomes wholly covered with ulcerations; but, before arriving at this height, the constitutional disease generally displays itself on the nurse by ulcerations of the throat.

In the cure, mercury is the chief remedy to be either given to the nurse or the child.

The former is more uncertain, and will also seldom be submitted to; the latter, therefore, is preferred.

To be given in two forms of calomel, or Van Sweeten's solution; as,

R Calomel, gr. i.
Sacchar. alb. gr. ij. m. ft. Pulv. Powder a dose, and to be repeated every night for eight nights; then the same dose, every other night, for twelve nights.

R Solut. corrosiv. sublimat.
Ut in p. 156. Thirty drops a dose every night in milk.

R Liquoris Hydrargyr.
Muriat. ut in p. 196, 3 ff.
Decoct. Sarsæ, ut in vol. II. p. 426, lb. i. m. A table-spoonful every night.

King's Evul.

Scrofula is very various in its appearance, and extended in its seat. Its primary symptom is the swelling of the lymphatic glands, ending in ulceration: this ulceration extends in to other parts; and, in its progress, the whole of the system appears to take on the morbid state.

250 : EXTEMPORANEOUS PRESCRIPTION.

The treatment directed in vol. I. p. 337; and in vol. II. pp. 429 and 435; also,

R_x Ammon preparat. ʒij.
Rad. Gentian. Incis. ʒi.
Affunde Spt. Vin. Gallic. ʒxij. ft. tinct.

A tea-cupful in a glass of water, three or four times a day.

R_x Æthiop. Mineral.
Vegetab. ā ʒij.
Milleped. preparat.
Spong. ust.
Sulphur. precipitat. ʒij.
Conserv. Lujulæ, ʒvi.
Syr. Altheæ, q. s. ut fiat elect.

The size of a nutmeg night and morning.

The local treatment detailed in p. 199 and 211; also,

R_x Ungt. Altheæ,
Fel Bovin. recent.
Sapon. Venet. ā ʒij.
Petrolei, ʒij.
Sal Cornu Cervi volat. ʒff.
Camphor. ʒi. m. et trit. bene, ut ft. Ungt.

A small quantity to be frequently rubbed in, on the swelling.

R_x Camphoræ, ʒi.
Spt. Sal volat. Ammon. ʒij.
Ol. Olivæ, ʒff. m. ut ft. Ungt.

R_x Scillæ Recent. in
Pulp. redact. ʒi.
Alkali Caustic. ʒi.
Exprime per Linteum, et misce cum Mellis.
Ungt. Basilicon. ā ʒi. ut ft. Ungt.

R_x Emplast. Galban. ʒi.
Camphor. ʒi.
Petrolei, ʒij.
Sal Volat. C. C. ʒff. m. ut ft. Emplast.

Watery Head.

Hydrocephalus, or the watery-head, is a disease peculiar to infancy. It is of two kinds; the external and internal. The former is generally coeval with birth, or precedes it: the latter, however, is most frequent in its occurrence, and generally fatal in its termination.

External.

Treatment, the frequent application of blisters along the course of the sinus, and afterwards keeping up a discharge.

Internal.

This disease is distinguished by pain of head across the brow, accompanied with nausea, sickness, and other disorders of the animal functions, without any evident cause, and sudden in their attack; variable state of pulse; constant slow fever; and, in the advanced stage of the disease, dilatation of the pupil of the eye, with a tendency to a comatose state.

Treatment detailed in vol. I. p. 333, and it depends on bleeding, blistering, and issues, in early stage.

In the more advanced, on mercury and diuretics.

The mercury is to be used in liberal doses, in the form of calomel, or by unction.

The diuretics preferred are, the digitalis and doronicum Germanicum.

The effects of the disease are to be obviated by the use of tonics, as in vol. I. p. 299.

Mesenteric Fever.

Mesenteric fever is most common in its attacks from the age of three or four years. It is irregular in its paroxysms, occasionally remitting, and at other times entirely intermitting. It is attended with loss of appetite, swelled belly, pain of bowels, daily attacking and alternating with periods of ease, and some days it is entirely absent. The child sensibly falls off; it cannot walk, if formerly able to do it; and inclines to lie much in one posture, from the languor and debility induced; a general flaccidity and paleness of countenance is conspicuous; and, in the

progress of the disease, the mesenteric affection becomes visible, by the increased size of belly, its hardness, and pain.

Treatment regulated by the stage of the disease.

First stage treated by clearing the bowels, followed, alternately, by the use of calomel and neutral salts, on successive days; and this plan regularly continued till a remission takes place.

Second stage treated by mercurial friction to the abdomen, and the external remedies enumerated vol. II. p. 446.

Internally, narcotics and neutral salts should be exhibited; as,

R̄ Decoct. Cicut. ℥viij.

Sal Natron. ℥i. m.

A tea-spoonful three or four times a day.

On a remission taking place, tonics then indicated, as in vol. I. p. 299.

Hectic Fever

Must be regulated in its treatment by the primary disease, of which it is a consequence.

Rickets

Consist in an enlargement of the head anteriorly, and in a swelling of the joints, flattened ribs, protuberant belly, and general emaciation, with a bloated or florid countenance.

Treatment, as detailed in p. 165; also,

R̄ Hydrarg. è Sulphur.

Pulv. Rhæi, ā gr. v.

Aromat. gr. ij. m. ft; Pulv.

To be given thrice a week.

R̄ Tinct. Ferri muriat. ℥ss.

Five to 20 drops a dose, in a glass of bark decoction, twice a day.

R̄ Ferri Ammoniac. gr. ij.

A dose every night.

External treatment, as directed in p. 280; also,

R̄ Ol. Palmæ, ℥ij.

Balsam. Peruv.

Ol. Nuc. Moschat. ā ℥i.

Spt. Ammon. ℥ij. Succin. ā gutt. xi. m.

With which the parts affected are to be anointed.

Difficulty of Urine.

This affection is marked by pain in the discharge of urine, a frequent desire to avoid it, or with pain on the first attempt. The urine itself displays also a morbid state, being either mixed with a thick mucus, or tinged with blood; or it shows small coagula, intermixed with the discharge, that fall to the bottom.

The treatment consists first in the use of diluents and emollients, to remove irritation, as in vol. I. p. 286.

When inflammatory stage past cure, to be completed as in chronic nephritis, ditto.

When the disease is recurrent, the virga aurea is specific.

Suppression of Urine.

Suppression of urine, from impeded secretion, is known to occur, though a rare disease, in infancy; and the want of accumulation, or pain in the lower part of the belly, marks it from this cause.

To be treated by obviating inflammation by leeches to the abdomen.

Blisters to the sacrum, the warm bath, and the occasional use of laxatives and diuretics, vol. I. p. 332, proper.

Calculus.

The stone is a disease particularly common to infancy, more so even than to adults. In the form of gravel, the symptoms are generally slight, and yield to some gentle emollient laxative, to dilution, or some mild alkali.

Symptoms of irritation from stone to be alleviated by dilution, some emollient laxative as in vol. I. p. 286, and the use of a mild alkali, as in p. 240.

Occasional fits of pain will yield to the warm bath and an opiate. *Vide* vol. I. p. 305.

Incontinence of Urine.

This is seldom, in infancy, a primary disease, but a consequence of some other, as an affection of the bladder or spine. It is at times attended with violent gonorrhœa.

Acute species treated by blisters to the sacrum, tincture of cantharides in some soft emulsion, or astringents.

Excessive Thirst

Is attended with a discharge of urine equal to the excess of fluid drank; and the urine is of the same pale watery appearance as when the fluid is received.

The treatment uncertain. The use of tonics has been proposed, and opening the secretions of the skin or kidneys.

Inflamed Eyes.

Children, at birth, are very subject to ophthalmia, which varies in its degree, obstinacy, and extent. From the appearance of the discharge, three species of it are noticed, viz. the blood-shot, watery, and purulent.

The first is treated by an astringent wash, as in vol. II. p. 413, and an additional covering to the head.

The second by the common means of obviating inflammation, and the use of collyria, as in vol. I. p. 280. And

The third by the same means employed in the most active manner from the higher inflammation present.

Film, or Speck.

This disease has been treated at large elsewhere (vol. II. p. 189). In children, as in adults, it is most frequent in a scrofulous constitution; and arises as a consequence of effusion during the progress of inflammation.

To be treated by stimulants cautiously employed, as the aqua cupri ammon. the corrosive solution, or nitrated ointment.

Cataract.

Cataract and gutta serena are not infant diseases; they may, however, occur, under peculiar circumstances, as congenite disorders, and their consideration is therefore necessary here.

The treatment depends chiefly, at this period, on stimulating applications, as the use of a brush, or exciting inflammation by diluted æther, the corrosive solution, diluted oil of amber, steams of turpentine, &c.

Stye.

To be treated, when suppuration takes place, by touching its base with caustic, or applying a ligature.

Deafness.

Deafness from cold yields to additional warmth to the part, and the use of laxatives.

Deafness from induration removed by syringing the ears; using afterwards emollients, as in vol. II. p. 440; or stimulants, as,

R. Ol. Amygdal. ʒff.

Ol. Succin. rectificat. gutt. xx.

Spt. Camphorat. ʒff.

Tinct. Castor. ʒi. m.

Four or six drops to be
dropped into the ear
warm, morning and
evening.

Deafness from dryness of ear removed either by an artificial supply, as the use of soap liniment or oil of almonds and æther, or by restoring the natural supply by onion juice inserted into the ear, by a clove of garlic, and covering it by adhesive plaster from the air; or by a blister behind the ear, or by electricity.

Canker.

Canker of the mouth consists in small sores affecting the mouth, the inside of the lips, or the gums. It occurs at three periods:

either after birth, when it forms a species of aphthæ (as in p. 39); or during the time of teething, when it arises from the irritation of the protruding teeth; or at the age of six or seven years, when the first set of teeth are changing; and it is at this time the worst species of the disease appears, the whole gum dissolving into foul sores. It is considered as prevailing in some countries more than in others. It is a trifling complaint, unless when combined with poverty and improper nutriment.

The treatment consists in the use of local astringents (first removing any stumps or carious teeth, if they appear the source of irritation); as,

℞ Bol. Armen.
G. Myrrh.
C. P. C.
Crem. Tartar. ā ʒi.
Mel. Rosar. q. s. ut ft. past. *With a little of which the gums are to be frequently touched.*

℞ Aq. Calcis, ʒvij.
Tinct. Myrrh.
Mel. Rosar, ā ʒss. m. *Wash to be frequently used.*

When these means fail, solutions of alum and diluted muriatic acid are to be employed, and their success assisted by the internal exhibition of the bark, sarsa, and mineral acids.

Gangrene of the Cheek.

This disease is preceded by the appearance of a black spot on the cheek or lip, ushered in with some degree of rigor or cold fit. This spot spreads fast, and the parts dissolve into ulceration without apparent marks of inflammation.

To be treated by the most powerful antiseptics internally, as in p. 229. Also,

℞ Infus. Rosar. rubr. ʒiv.
Acid. muriat. gutt. viij. m. *A spoonful often.*

External applications of the same kind; as,

℞ Infus. Chamemel. ʒvi.
Acid. muriat. gutt. xij. m. *With which the sore is to be frequently washed.*

R Infus. Salviæ, cum
Acid. muriat.

R Mel. Rosæ, ℥i.
Acid. muriat. gutt. iv. m.

Liniment for the sore.

R Cataplas. Dauci.

The primæ viæ to be kept open by laxatives, as in p. 227.

Swelling of Breasts.

To be pailated, till puberty, by the use of emollients, as in vol. II. p. 415.

White Swelling.

Treated as in vol. II. p. 436.

Curved Spine and Palsy.

The seat of this injury varies, being either the neck, back, or upper part of the loins. Its first symptoms in children are irregular twitchings in the muscles of the thighs, succeeded by dislike to motion. An incapacity to move next takes place; along with it the extremities lose much of their sensibility. This incapacity prevails in various degrees; but the use of the extremities, in time, comes to be totally lost, and a remarkable rigidity of the ankles is at the same time conspicuous.

To be treated by the formation of a drain or issue, as directed in vol. II. p. 452, on each side the seat of the injury, giving support to the parts above by machinery, and employing tonics at the same time to forward their success.

Simple Debility of Lower Extremities.

This is a complaint not very frequent. It is the effect of preceding disease, but it shows no marks, during its continuance, of being complicated with any other affection. The only symptom is the *debility itself*, gradually increasing, till, in four or five weeks from its commencement, the use of the limbs is entirely lost.

To be treated by blisters and caustics to the sacrum, by stimulant applications to the legs and thighs, as in vol. I. p. 289; and by the use of irons, to give support till the strength of the is restored.

Debility, with Discolouration.

This differs from the former in being, apparently, a general affection of the system. The children become weakly, and drag their legs after them; the head enlarges, the limbs become emaciated, and over the whole there appears a deep leaden blue colour.

To be treated by cordials and tonics internally, and externally by warm sea-bathing, friction, and stimulants.

Curvature of Bones, with Injury.

To be treated as in vol. II. p. 452.

Whitlow.

To be treated as in vol. II. p. 432; also,

℞ Ungt. Altheæ, ℥ij.
Spt. Vin. Camphorat. ℥ij.
Opil, gr. vi. m. ft. Liniment.

℞ Camphoræ, ℥i.
Ol. Palinæ, ℥viij. m. ft. Liniment.

Boil.

To be treated as phlegmon, vol. II. p. 430.

Chilblains.

To be treated as in vol. II. p. 433; also,

℞ Ol. Palmæ, ℥i.
Macis, ℥ss.
Camphoræ, ℥ij. m. ft. Liniment. *To be used night and morning.*

Burns.

To be treated as in vol. II. p. 420.

External Injuries of Bones.

These consist of luxations and fractures; and the rules for their treatment are the same as in the adult, detailed in vol. II. pp. 450 and 451.

Morbid Adhesion of Tongue.

To be treated by the operation.

Swallowing of tongue to be attended to; and, on restoring it to its place, the hæmorrhage, if considerable, to be stopped by Petit's instrument.

Hiccough

Forms a mild species of convulsion, to which infancy and childhood are much subjected.

In infancy, to be treated by correcting predominant acidity, and by absorbents, as in p. 226.

In childhood, by counteracting irritability, by the use of vinegar or the citric acid, or any powerful stimulus, suspending the feeling for a time.

Bleeding at the Nose.

To be treated as in vol. I. p. 294.

Affections of Navel.

Hæmorrhage.

Bleeding, or a rawness, is apt to arise on the separation of the cord. It is the effect of a soft fungus, preventing the skin stretching, as usual, over the mouths of the vessels.

To be treated by compression, with lint secured by sticking, plaster, or a bandage; and, if necessary, the use of external styptics conjoined.

Ulceration.

To be treated by a singed rag, the application of absorbents, a cabbage-leaf or toasted raisin, or, failing these, a gentle use of caustic.

Where more extensive, and of a gangrenous nature, to be treated by antiseptics, as in p. 229.

Imperfect Separation of Cord.

To be treated by the application of a new ligature, so as to enable it completely to shrink,

Swelling of Prepuce.

Yields to fomentations and scarification.

Falling-down of Gut.

To be treated by astringent lotions, after reducing it; and even injections of the same nature into the anus.

Where much inflammation, a saturnine injection, with laudanum, first made, before attempting the reduction.

Discharge from the Vagina.

The nature of these discharges, preceding puberty, is various, being either bloody, mucous, or purulent.

To be treated by saturnine lotion, as in vol. II. p. 413; and, where obstinate, by a slight use of mercury, in the form of the corrosive sublimate, or the bark, and some of the balsams, as in vol. I. p. 286.

Contaminated Wounds.

To be treated as in vol. II. p. 421.

Congenite Diseases.

Deranged Circulation.

The symptoms of this affection are, a discolouration of the face and neck, with a dark blue or leaden colour of the lips. The period of their appearance is soon after birth; and they continue to increase, attended with difficult respiration on motion; neither are the symptoms relieved by any means employed but confinement to one posture.

Nothing, in the way of treatment, can be attempted.

Deficiency of Cranium.

Hernia of the Brain.

It is chiefly by want of fluctuation, by the effect of pressure, and by its pulsation, that it is distinguished from other tumors in this situation.

To be treated by a gradual compression, made by a thin piece of lead appended to the child's cap.

External Tumors.

The partial kind is one conspicuous at birth, on the cranium, resembling in size an egg, and of a round form, with the skin discoloured.

Treatment, the use of astringents; as, fomentations of red wine or diluted brandy; compression, by means of a piece of thin lead; puncture, where the contents are daily augmenting.

The general species of external tumor yields to time and the use of warm astringent embrocations; as, a solution of vinegar, of ammoniac, or camphorated spirits.

Spina Bifida

admits of no cure; even pressure is hardly admissible.

Parenchymatous Tumors.

Yield to astringents, to pressure, or extirpation.

Hernias.

The umbilical treated by compression, by means of sticking-plaster, or a bandage.

The inguinal generally yields to cold bathing; and, when more advanced, to a truss.

Hydrocele

Yields readily to the use of external astringents.

*Imperfection of Parts.**Imperforation of Vagina.*

To be treated as in vol. IV. p. 13.

Of Anus.

To be treated as in Surgery.

Of Penis.

To be treated as in Surgery.

Of Lips.

To be treated as in vol. II. p. 218.

Of Ears.

To be treated as in vol. II. p. 217.

Of Eyes.

To be treated, where the defect consists in squinting, by drawing the distorted eye in a right direction, by directing it in that way.

Of Feet.

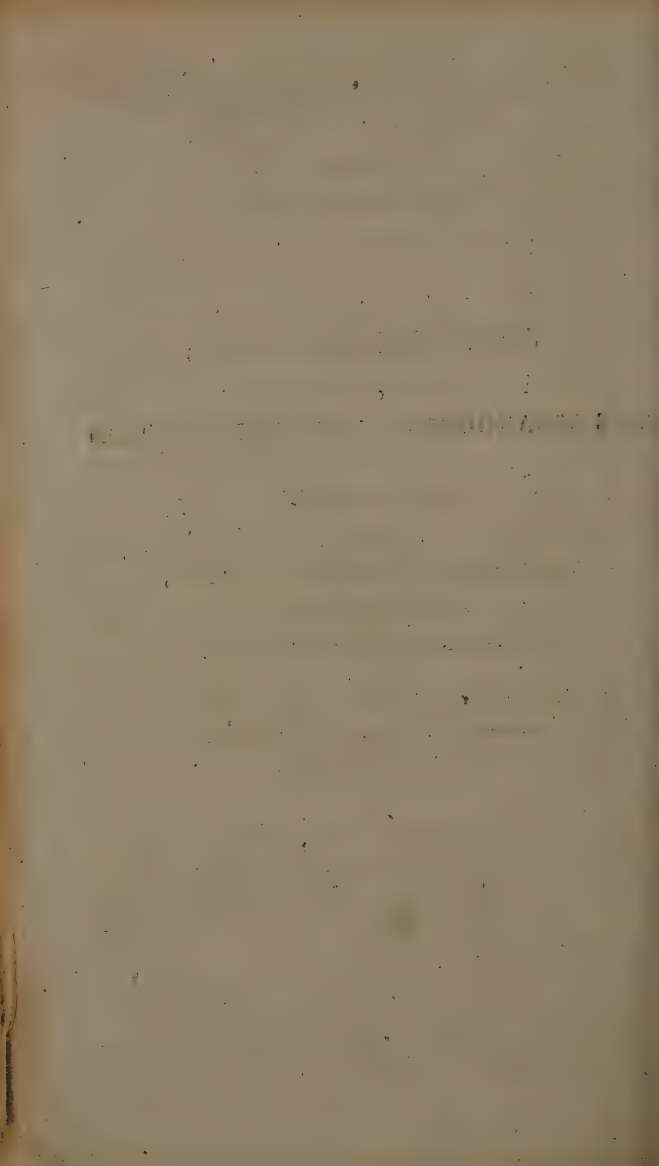
To be treated as in vol. II. p. 235.

Orpinal Marks.

To be treated, where capable of relief, as described vol. II. p. 207.



A
VIEW OF NOSOLOGY;
OR,
THE ARRANGEMENT AND CLASSIFICATION
OF
DISEASES:
EXHIBITING
THE SYSTEMS OF DIFFERENT AUTHORS,
To the present Time;
AND CONNECTING THE MOST APPROVED,
VIZ.
THE LATE DR. CULLEN'S,
WITH THE PRECEDING VOLUMES.





NOSOLOGY.

I. WE have now considered the practice of medicine and surgery in their full extent; but, to render the view complete, it may be still necessary to connect the account of the diseases exhibited in this and the preceding volumes with a system of Nosology; a subject so essentially necessary for every practitioner, in order to excel in the discrimination of disease.

II. Nosology is properly that study or science, which, embracing solely the pathognomonics, or distinguishing symptoms of disease, ascertains, by this means, their nature and character.

III. Every disease, as it appears in nature, forms a distinct species, or has a greater or lesser set of sym-

ptoms entirely peculiar to itself; and a certain number, also, in which it agrees with some other diseases. Hence arises a distinction in the symptoms of disease. By the latter its relation is established to other diseases; and, by the former, its morbid appearances, or phenomena, are confined to itself. It is this distinction, therefore, which, in the progress of the study of Nosology, has caused genera to be formed out of the species, or out of diseases, as they naturally appear.

IV. In forming genera, however, much accuracy of observation is necessary, so as not to curtail the species too much, on the one hand, or load the memory by imperfect observation on the other. Hence, in the species, no distinction should be made where the train of symptoms varies only in degree, or is modified somewhat by state of constitution, or some slight variation in the action of the same cause.

V. Two circumstances particularly evince the relation of diseases to each other.

The first is, the similitude of their cause, which always infers a similitude of action. This is strongly apparent in all contagious diseases.

The second circumstance is, the accordance in the

success of their treatment; for diseases, cured by the same means, infallibly partake of the same nature.†

VI. In marking the characters of diseases, or forming Nosology, the rules to be established are:

1. To select those external marks only which are obvious to the senses, rejecting all conjecture beyond this obvious appearance, or laying aside any consideration of the internal state; and these obvious marks are what strike the physician more than what regulate, or are drawn from, the feelings of the patient.

2. That these obvious, or external marks, be the constant attendants of the disease, either on its first attack or its progress. The cause, therefore, of the disease, where apparent, is not to be rejected, nor the progressive succession of its phenomena.

3. That no more of these external marks, or symptoms, be taken, than what are sufficient to characterise the disease. And,

4. That the state or defect of the functions be noted, as affording a leading conclusion to the character of many diseases.

VII. Having established the proper mode of defining diseases by these rules, this definition should be expressed in the most common, or generally-adopted

N 4

† Syphilis & obstructed liver are both cured by Mercury
 in what respect do these two diseases partake of a common
 nature?

terms; and where any alteration in this respect is employed, synonymses, as explanatory of it, should always be joined.

VIII. With these observations on the principles of Nosology in view, we shall now exhibit an abstract of the leading systems of it that have appeared, finishing with that of Dr. Cullen, as best suited to the purposes of the practical physician.

SYNOPTICAL VIEW

OF THE

SYSTEM OF SAUVAGES.

THE first System of Nosology that appeared was that of the celebrated Sauvages in 1732: previous to his time, the hint of such a work had been strongly thrown out by Sydenham and Baglivi; and, even before this, some rude attempt had been made towards it by Plater.

The System of Sauvages is arranged into ten classes; these classes are divided into different orders; and these orders into different genera, composed of their several species—thus:

CLASS I. VITIA:

ORDER I. *MACULÆ.*

- | | |
|-------------------|-----------------|
| Genus 1. Leucoma. | 4. Gutta rosea. |
| 2. Vitiligo. | 5. Nævus. |
| 3. Ephelis. | 6. Ecchymoma. |

ORDER II. *EFFLORESCENTIÆ.*

- | | |
|---------------|--------------|
| 7. Herpes. | 9. Psyracia. |
| 8. Epinyctis. | 10. Hidroa. |

ORDER III. *PHYMATA.*

- | | |
|----------------|-----------------|
| 11. Erythema. | 17. Parotis. |
| 12. Œdema. | 18. Furunculus. |
| 13. Emphysema. | 19. Anthrax. |
| 14. Schirrus. | 20. Cancer. |
| 15. Phlegmone. | 21. Paronychia. |
| 16. Bubo. | 22. Phimosis. |

ORD. IV. *EXCRESCENTIÆ.*

- | | |
|----------------|------------------|
| 23. Sarcoma. | 28. Bronchocele. |
| 24. Condyloma. | 29. Exostosis. |
| 25. Verruca. | 30. Gibbositas. |
| 26. Pterygium. | 31. Lordosis. |
| 27. Hordeolum. | |

ORD. V. *CYSTIDES.*

- | | |
|-----------------|-----------------|
| 32. Aneurysma. | 37. Lupia. |
| 33. Varix. | 38. Hydarthrus. |
| 34. Hydatis. | 39. Apostema. |
| 35. Marisca. | 40. Exomphalus. |
| 36. Staphyloma. | 41. Oscheocele. |

ORD. VI. *ECTOPIÆ.*

- | | |
|---------------------|---------------------|
| 42. Exophthalmia. | 53. Hepatocele. |
| 43. Blepharoptosis. | 54. Splenocoele. |
| 44. Hypostrophyle. | 55. Hysterocele. |
| 45. Paraglossa. | 56. Cystocoele. |
| 46. Proptoma. | 57. Encephalocoele. |
| 47. Exania. | 58. Hysterolòxia. |
| 48. Exocyste. | 59. Parorchidium. |
| 49. Hysteroptosis. | 60. Exarthrema. |
| 50. Enterocoele. | 61. Diastasis. |
| 51. Epiplocele. | 62. Laxarthrus. |
| 52. Gasterocoele. | |

ORD. VII. *PLAGÆ.*

- | | |
|-----------------|------------------|
| 63. Vulnus. | 71. Ulcus. |
| 64. Punctura. | 72. Exulceratio. |
| 65. Excoriatio. | 73. Sinus. |
| 66. Contusio. | 74. Fistula. |
| 67. Fractura. | 75. Rhagas. |
| 68. Fissura. | 76. Eschara. |
| 69. Ruptura. | 77. Caries. |
| 70. Amputatura. | 78. Anthrocace. |

CLASSIFICATION.

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CLASS II. FEBRES.

ORD. I. CONTINUÆ.

- | | |
|---------------|--------------|
| 79. Ephemera. | 82. Typhus. |
| 80. Synocha. | 83. Hæctica. |
| 81. Synochus. | |

ORD. II. REMITTENTES.

- | | |
|------------------|------------------|
| 84. Amphimerina. | 86. Tetartophya. |
| 85. Tritæophya. | |

ORD. III. INTERMITTENTES.

- | | |
|-----------------|---------------|
| 87. Quotidiana. | 89. Quartana. |
| 88. Tertianæ. | 90. Erratica. |

CLASS III. PHLEGMASIÆ.

ORD. I. EXANTHEMATICÆ.

- | | |
|----------------|-----------------|
| 91. Pestis. | 96. Purpura. |
| 92. Variola. | 97. Erysipelas. |
| 93. Pemphigus. | 98. Scarlatina. |
| 94. Rubeola. | 99. Effera. |
| 95. Miliaris. | 100. Aphtha. |

ORD. II. MEMBRANACÆ.

- | | |
|---------------------|------------------|
| 101. Phrenitis. | 105. Enteritis. |
| 102. Paraphrenesis. | 106. Epiploitis. |
| 103. Pleuritis. | 107. Metritis. |
| 104. Gastritis. | 108. Cystitis. |

ORD. III. PARENCHYMATOSÆ.

- | | |
|---------------------|-----------------|
| 109. Cephalitis. | 113. Hepatitis. |
| 110. Cynanche. | 114. Splenitis. |
| 111. Carditis. | 115. Nephritis. |
| 112. Peripneumonia. | |

CLASS IV. SPASMI.

ORD. I. TONICI PARTIALES.

- | | |
|------------------|-------------------|
| 116. Strabismus. | 119. Contractura. |
| 117. Trismus. | 120. Crampus. |
| 118. Obfipitas. | 121. Priapismus. |

ORD. II. *TONICI GENERALES.*

122. Tetanus.

123. Catochus.

ORD. III. *CLONICI PARTIALES.*

124. Nyctagmus.

128. Convulsio.

125. Carphologia.

129. Tremor.

126. Pandiculatio.

130. Palpitatio.

127. Apomyttosis.

131. Claudicatio.

ORD. IV. *CLONICI GENERALES.*

132. Rigor.

135. Hysteria.

133. Eclampsia.

136. Scelotyrbe.

134. Epilepsia.

137. Beriberia.

CLASS V. *ANHELATIONES.*ORD. I. *SPASMODICÆ.*

138. Ephialtes.

141. Singultus.

139. Sternutatio.

142. Tussis.

140. Oseido.

ORD. II. *OPPRESSIVÆ.*

143. Stertor.

148. Pleurodyne.

144. Dyspnœa.

149. Rheuma.

145. Asthma.

150. Hydrothorax.

146. Orthopnœa.

151. Empyema.

147. Angina.

CLASS VI. *DEBILITATES.*ORD. I. *DYSÆSTHESIÆ.*

152. Cataracta.

157. Agheusia.

153. Caligo.

158. Dysfecœa.

154. Amblyopia.

159. Paracusis.

155. Amaurosis.

160. Cophosis.

156. Anosmia.

161. Anæsthesia.

ORD. II. *ANEPITHYMIÆ.*

- | | |
|----------------|--------------------|
| 162. Anorexia. | 164. Anaphrodisia. |
| 163. Adipsia. | |

ORD. III. *DYSCINESIÆ.*

- | | |
|------------------|------------------|
| 165. Mutitas. | 169. Paralyfis. |
| 166. Aphonia. | 170. Hemiplegia. |
| 167. Psellismus. | 171. Paraplexia. |
| 168. Paraphonia. | |

ORD. IV. *LEIPOPSYCHIÆ.*

- | | |
|-------------------|----------------|
| 172. Asthenia. | 174. Syncope. |
| 173. Leipothymia. | 175. Asphyxia. |

ORD. V. *COMATA.*

- | | |
|------------------|-----------------|
| 176. Catalepfis. | 180. Cataphora. |
| 177. Ecstasis. | 181. Carnus. |
| 178. Typhomania. | 182. Apoplexia. |
| 179. Lethargus. | |

CLASS VII. *DOLORES.*

ORD. I. *VAGI.*

- | | |
|--------------------|-----------------|
| 183. Arthritis. | 188. Lassitudo. |
| 184. Ostocopus. | 189. Stupor. |
| 185. Rheumatismus. | 190. Pruritus. |
| 186. Catarrhus. | 191. Algor. |
| 187. Anxietas. | 192. Ardor. |

ORD. II. *CAPITIS.*

- | | |
|-------------------|------------------|
| 193. Cephalalgia. | 196. Ophthalmia. |
| 194. Cephalæa. | 197. Otalgia. |
| 195. Hemicrania. | 198. Odontalgia. |

ORD. III. *PECTORIS.*

- | | |
|-----------------|------------------|
| 199. Dysphagia. | 201. Cardiognus. |
| 200. Pytofis. | |

ORD. IV. *ABDOMINALES INTERNI.*

- | | |
|-------------------|-------------------|
| 202. Cardialgia. | 206. Splenalgia. |
| 203. Gaströdynia. | 207. Nephralgia. |
| 204. Colica. | 208. Dyftocia. |
| 205. Hepatalgia. | 209. Hyfteralgia. |

ORD. V. *EXTERNI ET ARTUUM.*

- | | |
|------------------|------------------|
| 210. Mastodynia. | 213. Ifchias. |
| 211. Rachialgia. | 214. Proctalgia. |
| 212. Lumbago. | 215. Pudendagra. |

CLASS VIII. *VESANIAE.*ORD. I. *HALLUCINATIONES.*

- | | |
|----------------|-----------------------|
| 216. Vertigo. | 219. Syrogmosi. |
| 217. Suffufio. | 220. Hypochondriafis. |
| 218. Diplopia. | 221. Somnambulifmus. |

ORD. II. *MOROSITATES.*

- | | |
|------------------|-------------------|
| 222. Pica. | 227. Panophobia. |
| 223. Bulimia. | 228. Satyriafis. |
| 224. Polydipfia. | 229. Nymphomania. |
| 225. Antipathis. | 230. Tarantifmus. |
| 226. Nofalgia. | 231. Hydrophobia. |

ORD. III. *DELIRIA.*

- | | |
|--------------------|-------------------|
| 232. Paraphrofyne. | 235. Mania. |
| 233. Amentia. | 236. Demonomania. |
| 234. Melancholia. | |

ORD. IV. *VERANIAE ANOMALAE.*

- | | |
|---------------|----------------|
| 237. Amnefia. | 238. Agrypnia. |
|---------------|----------------|

CLASS IX. FLUXUS.

ORD. I. *SANGUIFLUXUS.*

- | | |
|-------------------|-------------------|
| 239. Hæmorrhagia. | 243. Hæmaturia. |
| 240. Hæmoptysis. | 244. Menorrhagia. |
| 241. Stomacace. | 245. Abortus. |
| 242. Hæmatemesis. | |

ORD. II. *ALVIFLUXUS.*

- | | |
|-------------------|-----------------|
| 246. Hepatirrhœa. | 252. Ileus. |
| 247. Hæmorrhoids. | 253. Cholera. |
| 248. Dysenteria. | 254. Diarrhœa. |
| 249. Melæna. | 255. Cœliaca. |
| 250. Nausea. | 256. Lienteria. |
| 251. Vomitus. | 257. Tenesmus. |

ORD. III. *SERIFLUXUS.*

- | | |
|--------------------|----------------------|
| 258. Ephidrosis. | 265. Dysuria. |
| 259. Epiphora. | 266. Pyuria. |
| 260. Coryza. | 267. Leucorrhœa. |
| 261. Ptyalismus. | 268. Gonorrhœa. |
| 262. Anacatharsis. | 269. Dyspermatismus. |
| 263. Diabetes. | 270. Galactirrhœa. |
| 264. Enuresis. | 271. Octorrhœa. |

ORD. IV. *ÆRIFLUXUS.*

- | | |
|------------------|---------------|
| 272. Flatulents. | 274. Dysodia. |
| 273. Ædopsophia. | |

CLASS X. CACHEXIÆ.

ORD. I. *MACIES.*

- | | |
|----------------|----------------|
| 275. Tabes. | 277. Atrophia. |
| 276. Phthisis. | 278. Aridura. |

ORD. II. *INTUMESCENTIÆ.*

- | | |
|-------------------|------------------|
| 279. Polyfarcia. | 282. Phlegmatia. |
| 280. Pneumatosis. | 283. Physconia. |
| 281. Anasarca. | 284. Graviditas. |

ORD. III. *HYDROPE PARTIALES.*

- | | |
|---------------------|-------------------|
| 285. Hydrocephalus. | 290. Physometra. |
| 286. Physocephalus. | 291. Tympanites. |
| 287. Hydrorachitis. | 292. Metrorismus. |
| 288. Ascites. | 293. Ischuria. |
| 289. Hydrometra. | |

ORD. IV. *TUBERA.*

- | | |
|-----------------|------------------|
| 294. Rachitis. | 297. Leontiasis. |
| 295. Scrofula. | 298. Malis. |
| 296. Carcinoma. | 299. Frambœsia. |

ORD. V. *IMPETIGINES.*

- | | |
|---------------------|---------------|
| 300. Syphilis. | 303. Lepra. |
| 301. Scorbutus. | 304. Scabies. |
| 302. Elephantiasis. | 305. Tinea. |

ORD. VI. *ICTERITIÆ.*

- | | |
|--------------------|-----------------|
| 306. Anrigo. | 308. Phænigmus. |
| 307. Melasicterus. | 309. Chlorosis. |

ORD. VII. *CACHEXIÆ ANOMALÆ.*

- | | |
|-------------------|----------------|
| 310. Phthiriasis. | 313. Elcosis. |
| 311. Trichoma. | 314. Gangræna. |
| 312. Alopecia. | 315. Necrosia. |

SYNOPTICAL VIEW OF THE SYSTEM OF LINNÆUS.

NEXT to the system of Sauvages comes that of the celebrated Linnæus, who, after a new creation of knowledge on the subject of Botany, applied the same plan of arrangement to the elucidation of the nature of disease.—his system is divided into Eleven Classes, and is rather more extended than that of Sauvages, whom he however closely follows; but Linnæus we find not so happy in his arrangement of Diseases as in his *Systema Naturæ*.

CLASS I. EXANTHEMATICA.

ORD. I. CONTAGIOSI.

- | | |
|-------------|--------------|
| 1. Morta. | 4. Rubæola. |
| 2. Pestis. | 5. Petechia. |
| 3. Variola. | 6. Syphilis. |

ORD. II. SPORADICI.

- | | |
|--------------|------------|
| 7. Miliaria. | 9. Aphthæ. |
| 8. Uredo. | |

ORD. III. SOLITARIÆ.

- | |
|-----------------|
| 10. Erysipelas. |
|-----------------|

CLASS II. CRITICI.

ORD. I. CONTINENTES.

- | | |
|--------------|---------------|
| 11. Diaria. | 13. Synochus. |
| 12. Synocha. | 14. Lenta. |

ORD. II. INTERMITTENTES.

- | | |
|-----------------|----------------|
| 15. Quotidiana. | 18. Duplicana. |
| 16. Tertiana. | 19. Errana. |
| 17. Quartana. | |

ORD. III. EXACERBANTES.

- | | |
|------------------|------------------|
| 20. Amphimerina. | 23. Hermitritæa. |
| 21. Tritæus. | 24. Hæctica. |
| 22. Tetartophia. | |

CLASS III. PHLOGISTICI.

ORD. I. MEMBRANACEI.

- | | |
|--------------------|----------------|
| 25. Phrenitis. | 29. Enteritis. |
| 26. Paraphrenesis. | 30. Proctitis. |
| 27. Pleuritis. | 31. Cystitis. |
| 28. Gastritis. | |

ORD. II. PARENCHYMATICI.

- | | |
|--------------------|-----------------|
| 32. Sphacelismus. | 36. Splenitis. |
| 33. Cynanche. | 37. Nephritis. |
| 34. Peripnuemonia. | 38. Hysteritis. |
| 35. Hepatitis. | |

ORD. III. MUCSULOSI.

39. Phlegmone.

CLASS IV. DOLOROSI.

ORD. I. *INTRINSECI*.

- | | |
|------------------|------------------|
| 40. Cephalalgia. | 50. Colica. |
| 41. Hemicrania. | 51. Hepatica. |
| 42. Gravedo. | 52. Splenica. |
| 43. Ophthalmia. | 53. Pleuritica. |
| 44. Otalgia. | 54. Pneumonica. |
| 45. Odontalgia. | 55. Hysteralgia. |
| 46. Angina. | 56. Nephritica. |
| 47. Soda. | 57. Dysuria. |
| 48. Cardialgia. | 58. Pudendagra. |
| 49. Gastrica. | 59. Proctica. |

ORD. II. *EXTRINSECI*.

- | | |
|-------------------|---------------|
| 60. Arthritis. | 63. Volatica. |
| 61. Ostocopus. | 64. Pruritus. |
| 62. Rheumatismus. | |

CLASS V. MENTALES.

ORD. I. *IDEALES*.

- | | |
|-------------------|------------------|
| 65. Delirium. | 69. Dæmonia. |
| 66. Paraphrosyne. | 70. Vefania. |
| 67. Amentia. | 71. Melancholia. |
| 68. Mania. | |

ORD. II. *IMAGINARII*.

- | | |
|-----------------|----------------------|
| 72. Syringmos. | 75. Panophobia. |
| 73. Phantasmus. | 76. Hypochondriasis. |
| 74. Vertigo. | 77. Somnambulismus. |

ORD. III. *PATHETICI.*

- | | |
|-----------------|------------------|
| 78. Citta. | 84. Tarantismus. |
| 79. Bulimia. | 85. Rabies. |
| 80. Polydipsia. | 86. Hydrophobia. |
| 81. Satyriasis. | 87. Cacofitia. |
| 82. Erotomania. | 88. Antipathia. |
| 83. Noctalgia. | 89. Anxietas. |

CLASS VI. *QUIETALES.*ORD. I. *DEFECTIVI.*

- | | |
|----------------|-----------------|
| 90. Lassitudo. | 93. Lipothymia. |
| 91. Languor. | 94. Syncode. |
| 92. Asthenia. | 95. Asphyxia. |

ORD. II. *SOPOROSI.*

- | | |
|------------------|------------------|
| 96. Somnolentia. | 101. Apoplexia. |
| 97. Typhomania. | 102. Paraplegia. |
| 98. Lethargus. | 103. Hemiplegia. |
| 99. Cataphora. | 104. Paralyfis. |
| 100. Carus. | 105. Stupor. |

ORD. III. *PRIVATIVI.*

- | | |
|-----------------|------------------|
| 106. Morosis. | 114. Ageusia. |
| 107. Oblivio. | 115. Aphonia. |
| 108. Amblyopia. | 116. Anorexia. |
| 109. Cataracta. | 117. Adipsia. |
| 110. Amaurosis. | 118. Anæsthesia. |
| 111. Scotomia. | 119. Atecnia. |
| 112. Cophosis. | 120. Atonia. |
| 113. Anosmia. | |

CLASS VII. MOTORII.

ORD. I. SPASTICI.

- | | |
|-------------------|------------------|
| 121. Spasmus. | 126. Hysteria. |
| 122. Priapismus. | 127. Tetanus. |
| 123. Borborygmos. | 128. Catochus. |
| 124. Trismus. | 129. Catalepsis. |
| 125. Sardiasis. | 130. Agrypnia. |

ORD. II. AGITATORII.

- | | |
|------------------|------------------|
| 131. Tremor. | 139. Chorea. |
| 132. Palpitatio. | 140. Beriberi. |
| 133. Orgasmus. | 141. Rigor. |
| 134. Subfultus. | 142. Convulsio. |
| 135. Carpologia. | 143. Epilepsia. |
| 136. Stridor. | 144. Hieranofos. |
| 137. Hippos. | 145. Raphania. |
| 138. Pfellismus. | |

CLASS VIII. SUPPRESSORII.

ORD. I. SUFFOCATORII.

- | | |
|--------------------|------------------|
| 146. Raucedo. | 155. Tussis. |
| 147. Vociferatio. | 156. Stertor. |
| 148. Rifus. | 157. Anhelatio. |
| 149. Fletus. | 158. Suffocatio. |
| 150. Suspirium. | 159. Empyema. |
| 151. Oscitatio. | 160. Dyspnœa. |
| 152. Pandiculatio. | 161. Asthma. |
| 153. Singultus. | 162. Orthopnœa. |
| 154. Sternutatio. | 163. Ephialtes. |

ORD. II. *CONSTRUCTORII.*

- | | |
|-------------------|--------------------|
| 164. Aglutitio. | 168. Dyfmenorrhœa. |
| 165. Flatulentia. | 169. Dyslochia. |
| 166. Obstipatio. | 170. Aglactatio. |
| 167. Ischuria. | 171. Sterilitas. |

CLASS IX. *EVACUTORII.*ORD. I. *CAPITIS.*

- | | |
|-------------------|------------------|
| 172. Otorrhœa. | 175. Coryza. |
| 173. Epiphora. | 176. Stomacace. |
| 174. Hæmorrhagia. | 177. Ptyalismus. |

ORD. II. *THORACIS.*

- | | |
|--------------------|------------------|
| 178. Screatus. | 180. Hæmoptysis. |
| 179. Expectoratio. | 181. Vomica. |

ORD. III. *ABDOMINIS.*

- | | |
|-------------------|-------------------|
| 182. Ructus. | 189. Lienteria. |
| 183. Nausea. | 190. Cœliaca. |
| 184. Vomitus. | 191. Cholirica. |
| 185. Hæmatemefis. | 192. Dyfenteria. |
| 186. Iliaca. | 193. Hæmorrhoids. |
| 187. Cholera. | 194. Tenesmus. |
| 188. Diarrhœa. | 195. Crepitus. |

ORD. IV. *GENTIALIUM.*

- | | |
|------------------|-------------------|
| 196. Enurefis. | 202. Leucorrhœa. |
| 197. Stranguria. | 203. Menorrhagia. |
| 198. Diabetes. | 204. Parturitio. |
| 199. Hæmaturia. | 205. Abortus. |
| 200. Glus. | 206. Mola. |
| 201. Gonorrhœa. | |

ORD. V. *CORPORIS EXTERNI.*

- | | |
|----------------|-------------|
| 207. Galactia. | 208. Sudor. |
|----------------|-------------|

CLASS X. DEFORMES.

ORD. I. *EMACIANTES.*

209. Phthisis.

210. Tabes.

211. Atrophia.

212. Marasmus.

213. Rachitis.

ORD. II. *TUMIDOSI.*

214. Polyfarcia.

215. Leucophlegma-
tia.

216. Anafarcia.

217. Hydrocephalus.

218. Ascites.

219. Hypofarcia.

220. Tympanites.

221. Graviditas.

ORD. III. *DECOLORES.*

222. Cachexia.

223. Chlorosis.

224. Scorbutus.

225. Icterus.

226. Plethora.

CLASS XI. VITIA.

ORD. I. *HUMORALIA.*

227. Aridura.

228. Digitium.

229. Emphysema.

230. Œdema.

231. Sugillatio.

232. Inflammatio.

233. Abscessus.

234. Gangrena.

235. Sphacelus.

ORD. II. *DIALYTICA.*

236. Fractura.

237. Luxatura.

238. Ruptura.

239. Contusura.

240. Profusio.

241. Vulnus.

242. Amputatura.

243. Laceratura.

244. Punctura.

245. Morsura.

246. Combustura.

247. Excoriatura.

248. Intertrigo.

249. Rhagas.

ORD. III. *EXULCERATIONES.*

- | | |
|-----------------|------------------|
| 250. Ulcus. | 257. Arthrocace. |
| 251. Cacoëthes. | 258. Cocyta. |
| 252. Noma. | 259. Paronychia. |
| 253. Carcinoma. | 260. Pernio. |
| 254. Ozena. | 261. Pressura. |
| 255. Fistula. | 262. Arctura. |
| 256. Caries. | |

ORD. IV. *SCABIES.*

- | | |
|-----------------|-----------------|
| 263. Lepra. | 273. Anthrax. |
| 264. Tinea. | 274. Phlyctenæ. |
| 265. Achor. | 275. Pustula. |
| 266. Pfora. | 276. Papula. |
| 267. Lippitudo. | 277. Hordeolum. |
| 268. Serpigo. | 278. Verruca. |
| 269. Herpes. | 279. Clavus. |
| 270. Varus. | 280. Myrmecium. |
| 271. Bacchia. | 281. Eschara. |
| 272. Bubo. | |

ORD. V. *TUMORES PROTUBERANTES.*

- | | |
|-----------------|------------------|
| 282. Aneurisma. | 287. Anchylosis. |
| 283. Varix. | 288. Ganglion. |
| 284. Schirrus. | 289. Natta. |
| 285. Struma. | 290. Spinola. |
| 286. Atheroma. | 291. Exostosis. |

ORD. VI. *PROCIDENTIÆ.*

- | | |
|-----------------|-------------------|
| 292. Hernia. | 296. Pterygium. |
| 293. Prolapsus. | 297. Ectropium. |
| 294. Condyloma. | 298. Phimosis. |
| 295. Sarcoma. | 299. Clitorismus. |

ORD. VII. *DEFORMATIONES.*

- | | |
|-------------------|---------------------|
| 300. Contractura. | 304. Tortura. |
| 301. Gibber. | 305. Strabismus. |
| 302. Lordosis. | 306. Lagophthalmia. |
| 303. Distortio. | 307. Nyctalopia. |

CLASSIFICATION.

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308. Presbytia.

309. Myopia.

310. Labarium.

311. Lagostoma.

312. Apella.

313. Atreta.

314. Plica.

315. Hirsuties.

316. Alopecia.

317. Trichiasis.

ORD. VIII. *MACULÆ.*

311. Cicatrix.

319. Nævus.

320. Morphæa.

321. Vibex.

322. Sudamen.

323. Melasma.

324. Hepatizon.

325. Lentigo.

326. Ephelis.

SYNOPTICAL VIEW OF THE SYSTEM OF VOGEL.

AFTER the system of Linnæus comes to be noticed that of Vogel, professor at Göttingen. It comprehends, like that of Linnæus, no less than eleven classes.

CLASS I. FEBRES.

ORD. I. *INTERMITTENTES.*

- | | |
|--------------|----------------------|
| 1 Quotidiana | 8 Nonana |
| 2 Tertianæ | 9 Decimana |
| 3 Quartana | 10 Vaga |
| 4 Quintana | 11 Menstrua |
| 5 Sextana | 12 Terriana duplex |
| 6 Septana | 13 Quartana duplex |
| 7 Octana | 14 Quartana triplex. |

ORD. II. *CONTINUÆ.*

§ 1. SIMPLICES.

- | | |
|---------------|-------------------|
| 15 Quotidiana | 25 Phricodes |
| 16 Synochus | 26 Lyngodes |
| 17 Amatoria | 27 Affodes |
| 18 Phrenitis | 28 Cholericæ |
| 19 Epiala | 29 Syncopalis |
| 20 Caufos | 30 Hydrophobia |
| 21 Elodes | 31 Oscitans |
| 22 Lethargus | 32 Ictericodes |
| 23 Typhomania | 33 Pestilentialis |
| 24 Leipyria | 34 Siriasis |

§ 2. COMPOSITÆ.

¶ 1. *Exanthematicæ.*

- | | |
|----------------|-----------------|
| 35 Variolosa | 40 Urtica |
| 36 Morbillofa | 41 Bullofa |
| 37 Miliaris | 42 Varicella |
| 38 Petechialis | 43 Pemphingodes |
| 39 Scarlatina | 44 Aphthofa. |

¶ 2. *Inflammatoriæ.*

- | | |
|------------------|------------------|
| 45 Phrenismus | 59 Splenitis |
| 46 Chemofis | 60 Mesenteritis. |
| 47 Ophthalmites | 61 Omentitis |
| 48 Otites | 62 Peritonitis |
| 49 Angina | 63 Myocolitis |
| 50 Pleuritis | 64 Pancreatica |
| 51 Peripneumonia | 65 Nephritis |
| 52 Mediastina | 66 Cystitis |
| 53 Pericarditis | 67 Hyfteritis |
| 54 Carditis | 68 Erysipelacea |
| 55 Paraphrenitis | 69 Podagrica |
| 56 Gastritis | 70 Panaritia |
| 57 Enteritis | 71 Cyssotis. |
| 58 Hepatitis | |

¶ 3. *Symptomaticæ.*

- | | |
|-------------------|-----------------|
| 72 Apoplectica | 77 Vulneraria |
| 73 Catarrhalis | 78 Suppuratoria |
| 74 Rheumatica | 79 Lenta |
| 75 Hæmorrhoidalis | 80 Hæctica. |
| 76 Lactea | |

CLASS II. PROFLUVIA.

ORD. I. *HÆMORRHAGIÆ.*

- | | |
|----------------|------------------|
| 81 Hæmorrhagia | 89 Hæmatemesis |
| 82 Epistaxis | 90 Hepatirrhœa |
| 83 Hæmoptoë | 91 Catarrhexis |
| 84 Hæmoptysis | 92 Hæmaturia |
| 85 Stomacace | 93 Cystirrhagia |
| 86 Odontirrhœa | 94 Stymatosis |
| 87 Otorrhœa | 95 Hæmatopedesis |
| 88 Ophthalmor- | 96 Menorrhagia |
| rhagia | 97 Abortio. |

ORD. II. *APOCENOSES.*

- | | |
|----------------|--------------------|
| 98 Catarrhus | 112 Leucorrhœis |
| 99 Epiphora | 113 Eneuresis |
| 100 Coryza | 114 Diuresis |
| 101 Otopuosis | 115 Diabetes |
| 102 Otoplotos | 116 Puoturia |
| 103 Ptyalismus | 117 Chylaria |
| 104 Vomica | 118 Gonorrhœa |
| 105 Diarrhœa | 119 Leucorrhœa |
| 106 Puorrhœa | 120 Exoneirosis |
| 107 Dysenteria | 121 Hydropedesis |
| 108 Lienteria | 122 Galactia |
| 109 Cœliaca | 123 Hypercatharsis |
| 110 Cholera | 124 Ecphyse |
| 111 Pituitaria | 125 Dysodia. |

CLASS III. EPISCHESES.

- | | |
|-----------------|----------------|
| 126 Gravedo | 130 Amenorrhœa |
| 127 Flatulentia | 131 Dyslochia |
| 128 Obstipatio | 132 Deuteria |
| 129 Ischuria | 133 Agalaxis. |

CLASS IV. DOLORES.

134	Anxietas	157	Cardialgia
135	Blestrismus	158	Encaufis
136	Pruritus	159	Nausea
137	Catapsyxis	160	Colica
138	Rheumatismus	161	Eilema
139	Arthritis	162	Ileus
140	Cephalalgia	163	Stranguria
141	Cephalæa	164	Dysuria
142	Clavus	165	Lithiasis
143	Hemicrania	166	Tenesmus
144	Carebaria	167	Clunefia
145	Odontalgia	168	Cedma
146	Hæmodia	169	Hysteralgia
147	Odaxismus	170	Dysmenorrhœa
148	Otalgia	171	Dysstocia
149	Acatapofis	172	Atocia
150	Cionis	173	Priapismus
151	Himantofis	174	Psforiasis
152	Cardiogmus	175	Podagra
153	Mastodynia	176	Osteocopus
154	Soda	177	Psfophos
155	Periadynia	178	Volatica
156	Pneumatofis	179	Epiphlogisma.

CLASS V. SPASMI.

180	Tetanus	187	Rigor
181	Opisthotonus	188	Epilepsia
182	Episthotonus	189	Eclampsia
183	Catochus	190	Hieranofos
184	Tremor	191	Convulsio
185	Frigus	192	Raphania
186	Horror	193	Chorea

194	Crampus	208	Capistrum
195	Scelotyrbe	209	Sardiafis
196	Angone	210	Gelasmus
197	Glossocole	211	Incubus
198	Glossocoma	212	Singultus
199	Hippos	213	Palpitatio
200	Illofis	214	Vomitus
201	Cinclefis	215	Ructus
202	Cataclafis	216	Ruminatio
203	Cillofis	217	Cesophagismus
204	Sternutatio	218	Hypochondriafis
205	Tuffis	219	Hysteria
206	Clamor	220	Phlogofis
207	Trifinus	221	Digitium

CLASS VI. ADYNAMIÆ.

222	Lassitudo	242	Achlys
223	Asthenia	243	Nyctalopia
224	Torpor	244	Hemeralopia
225	Adynamia	245	Hemalopia
226	Paralyfis	246	Dysicoia
227	Paraplegia	247	Surditas
228	Hemiplegia	248	Anosmia
229	Apoplexia	249	Apogeufis
230	Catalepfis	250	Asaphia
231	Carus	251	Clangor
232	Coma	252	Raucitas
233	Somnolentia	253	Aphonia
234	Hypophafis	254	Leptophonia
235	Ptofis	255	Oxyphonia
236	Amblyopia	256	Rhenophonia
237	Mydriafis	257	Mutitas
238	Amaurofis	258	Traulotis
239	Cataracta	259	Pfellotis
240	Synizezis	260	Ischnophonia
241	Glaucoma	261	Battarismus

262 Suspirium	274 Syncope
263 Oscitatio	275 Asphyxia
264 Pandiculatio	276 Apepsia
265 Apnoea	277 Dyspepsia
266 Macropnoea	278 Diaphthora
267 Dyspnoea	279 Anorexia
268 Asthma	280 Anatrope
269 Orthopnoea	281 Adipsia
270 Pnigma	282 Acyifis
271 Rencus	283 Agenesia
272 Rhochmos	284 Anodynia
273 Lipothymia	

CLASS VII. HYPERÆSTHESES.

285 Antipathia	295 Polydipsia
286 Agrypnia	296 Bulimus
287 Phantasma	297 Addephagia
288 Caligo	298 Cynorexia
289 Hæmologia	299 Allotriophagia
290 Marmaryge	300 Malacia
291 Dysopia	301 Pica
292 Sufurrus	302 Bombus
293 Vertigo	303 Celsa
294 Apogeusia	

CLASS VIII. CACHEXIÆ.

304 Cachexia	311 Hydrothorax
305 Chlorosis	312 Rachitis
306 Icterus	313 Anasarca
307 Melanchlorus	314 Ascites
308 Atrophia	315 Hydrocystis
309 Tabes	316 Tympanites
310 Phthisis	317 Hyfterophyse

318	Scorbutus	324	Phthiriasis
319	Syphilis	325	Phyconia
320	Lepra	326	Paracyifis
321	Elephantiasis	327	Gangræna
322	Elephantia	328	Sphacelus.
323	Plica		

CLASS IX. PARANOIÆ.

329	Athymia	335	Enthusiasmus
330	Delirium	336	Stupiditas
331	Mania	337	Amentia
332	Melancholia	338	Oblivio
333	Ecstasis	339	Somnium
334	Ecplexis	340	Hypnobatafis.

CLASS X. VITIA.

ORD. I. INFLAMMATIONES.

341	Ophthalmia	346	Onychia
342	Blepharotis	347	Encaufis
343	Erysipelas	348	Phimosis
344	Hieropyr	349	Paraphimosis
345	Paronychia	350	Pernio.

ORD. II. TUMORES.

351	Phlegmone	361	Urticaria
352	Furunculus	362	Parulis
353	Anthrax	363	Epulis
354	Abfcessus	364	Anchylops
355	Onyx	365	Paraglossa
356	Hippopyon	366	Chilon
357	Phygethlon	367	Scrofula
358	Empyema	368	Bubon
359	Phyma	369	Bronchocele
360	Ecthymata	370	Parotis

371	Gongrona	399	Merocele
372	Sparganosis	400	Enterocoele ovularis
373	Coilima	401	Ifchiatocele
374	Scirrhus	402	Elytrocele
375	Cancer	403	Hypogastrocele
376	Sarcoma	404	Cystocoele
377	Polypus	405	Cyrtoma
378	Condyloma	406	Hydrenterocoele
379	Ganglion	407	Varix
380	Ranula	408	Aneurisma
381	Terminthus	409	Cirfocele
382	Œdema	410	Gastrocele
383	Encephalocoele	411	Hepatocoele
384	Hydrocephalum	412	Splenocoele
385	Hydrophthalmia	413	Hysterocele
386	Spina bifida	414	Hygrocirfocele
387	Hydromphalus	415	Sarcocoele
388	Hydrocele	416	Physcocoele
389	Hydrops Scroti	417	Exostoses
390	Steatitis	418	Hyperostosis
391	Pneumatosis	419	Pædarthrocace
392	Emphysema	420	Encystis
393	Hysteroptosis	421	Staphyloma
394	Cystoptosis	422	Staphylosis
395	Archoptoma	423	Fungus
396	Bubonocoele	424	Tofus
397	Oscheocoele	425	Flemen.
398	Omphalocoele		

ORD. III. EXTUBERANTIÆ.

426	Verruca	434	Hordecolum
427	Porrus	435	Grando
428	Clavus	436	Varus
429	Callus	437	Gutta rosacea
430	Enchantis	438	Ephelis
431	Pladarotis	439	Esoche
432	Pinnula	440	Exoche.
433	Pterygium		

ORD. IV. *PUSTULÆ & PAPULÆ.*

441	Epinyctis	446	Hydroa
442	Phlyctæna	447	Variola
443	Herpes	448	Varicella
444	Scabies	449	Purpura
445	Aquula	450	Encauma.

ORD. V. *MACULÆ.*

451	Ecchymoma	458	Vibex
452	Petechiæ	459	Vitiligo
453	Morbilli	460	Leuce
454	Scarlatæ	461	Cyasma
455	Lentigo	462	Lichen
456	Urticaria	463	Selina
457	Stigma	464	Nebula.

ORD. VI. *DISSOLUTIONES.*

465	Vulnus	485	Cacoëthes
466	Ruptura	486	Therionia
467	Rhagas	487	Carcinoma
468	Fractura	488	Phagedæna
469	Fissura	489	Noma
470	Plicatio	490	Sycosis
471	Thlasis	491	Fistula
472	Luxatio	492	Sinus
473	Subluxatio	493	Caries
474	Diachalasis	494	Achores
475	Attritis	495	Crusta lactea
476	Porrigio	496	Favus
477	Apofyrma	497	Tinea
478	Anapleufis	498	Argemon
479	Spasma	499	Ægilops
480	Contusio	500	Ozæna
481	Diabrosis	501	Aphthæ
482	Agomphiafis	502	Intertrigo
483	Eschara	503	Rhacosis
484	Piptonychia		

ORD. VII. CONCRETIONES.

- | | |
|-------------------|-------------------|
| 504 Ancyloblepha- | 507 Ancyloglossum |
| ron | 508 Ancylofis |
| 505 Zynizefis | 509 Cicatrix |
| 506 Dacrymoma | 510 Dactylion. |

CLASS XI. DEFORMITATES]

- | | |
|--------------------|--------------------|
| 511 Phoxos | 536 Cholosis |
| 512 Gibber | 537 Gryposis |
| 513 Caput obstipum | 538 Nævus |
| 514 Strabismus | 539 Monstrositas |
| 515 Myopiafis | 540 Polyfarcia |
| 516 Lagophthalmus | 541 Ischnotis |
| 517 Trichiafis | 542 Rhichosis |
| 518 Ectropium | 543 Varus |
| 519 Entropium | 544 Valgus |
| 520 Rhœas | 545 Leïopodes |
| 521 Rhyssmata | 546 Apella |
| 522 Lagocheilos | 547 Hypospadiæos |
| 523 Melachosteon | 548 Urorhœas |
| 524 Hirsuties | 549 Atreta |
| 525 Canities | 550 Saniodes |
| 526 Distrix | 551 Cripsorchis |
| 527 Xirasia | 552 Hermaphroditis |
| 528 Phalacrotis | 553 Dionysiscus |
| 529 Alopecia | 554 Artetiscus |
| 530 Madarosis | 555 Nefrendis |
| 531 Ptilosis | 556 Spanopogon |
| 532 Rodatio | 557 Hyperatetiscus |
| 533 Phalangosis | 558 Galiancon |
| 534 Coloboma | 559 Galbulus |
| 535 Cercofis | 560 Mola. |

SYNOPTICAL VIEW

OF THE

SYSTEM OF SAGAR.

AFTER that of Vogel, a system appeared by the celebrated Sagar, a physician at Inglaw in Moravia, still more extended, and having no fewer than thirteen classes, according to the following view.

CLASS I. VITIA.

ORD. I. *MACULÆ.*

- | | |
|------------|--------------|
| 1 Leucoma | 4 Nævus |
| 2 Vitiligo | 5 Ecchymoma. |
| 3 Ephelis | |

ORD. II. *EFFLORESCENTIÆ.*

- | | |
|--------------|-----------------|
| 6 Pustula | 11 Herpes |
| 7 Papula | 12 Epinyctis |
| 8 Phlycthæna | 13 Hemeropathos |
| 9 Bacchia | 14 Psyracia |
| 10 Varus. | 15 Hydroa. |

ORD. III. *PHYMATA.*

- | | |
|-------------|--------------|
| 16 Erythema | 18 Emphysema |
| 17 Œdema | 19 Scirrhus |

- 20 Inflammatio
- 21 Bubo
- 22 Parotis
- 23 Furunculus

- 24 Anthrax
- 25 Cancer
- 26 Paronychia
- 27 Phymosis.

ORD. IV. EXCRESCENTIÆ.

- 28 Sarcoma
- 29 Condyloma
- 30 Verruca
- 31 Pterygium

- 32 Hordeolum
- 33 Trachelophyma
- 34 Exostosis.

ORD. V. CYSTIDES.

- 35 Aneurysma
- 36 Vix
- 37 Marisca
- 38 Hydatis
- 39 Saphyloma

- 40 Lupia
- 41 Hydarthus
- 42 Apoptema
- 43 Exomphalus.
- 44 Oscheophyma.

ORD. VI. ECTOPIÆ.

- 45 Exophthalmia
- 46 Blepharoptosis
- 47 Hypostaphyle
- 48 Paraglossa
- 49 Proptoma
- 50 Exania
- 51 Exocystis
- 52 Hysteroptosis
- 53 Colpoptosis.
- 54 Gastrocele
- 55 Omphalocele
- 56 Hepatocele.
- 57 Merocele
- 58 Bubonocele

- 59 Opodeocele
- 60 Ischiocele
- 61 Colpocele
- 62 Perinæocele
- 63 Peritonæorixis
- 64 Encephalocele
- 65 Hysteroloxia
- 66 Parorchydium
- 67 Exarthrema
- 68 Diastasis
- 69 Loxarthrus
- 70 Gibbositas
- 71 Lordosis.

ORD. VII. DEFORMITATES.

- 72 Lagostoma.
- 73 Apella.
- 74 Polymerisma

- 75 Epidosis
- 76 Anchylomerisma
- 77 Hirsuties.

CLASS II. PLAGÆ.

ORD. I. *SOLUTIONES recentes, cruentæ.*

- | | |
|------------------|---------------|
| 78 Vulnus | 82 Excoriatio |
| 79 Punctura | 83 Contusio |
| 80 Sclopetopлага | 84 Ruptura. |
| 81 Morfus | |

ORD. II. *SOLUTIONES recentes, cruentæ, artificiales.*

- | | |
|--------------|------------------|
| 85 Operatio | 87 Sutura |
| 86 Amputatio | 88 Paracentesis. |

ORD. III. *SOLUTIONES incruentæ.*

- | | |
|----------------|----------------|
| 89 Ulcus | 93 Eschara |
| 90 Exulceratio | 94 Caries |
| 91 Fistula | 95 Arthrocace. |
| 92 Sinus | |

ORD. IV. *SOLUTIONES anomalæ.*

- | | |
|-------------|-------------|
| 96 Rhagas | 98 Fractura |
| 97 Ambustio | 99 Fissura. |

CLASS III. CACHEXIÆ.

ORD. I. *MACIES.*

- | | |
|--------------|-----------------|
| 100 Tabes | 103 Hæmatoporia |
| 101 Phthisis | 104 Aridura. |
| 102 Atrophia | |

ORD. II. *INTUMESCENTIÆ.*

- | | |
|-----------------|-----------------|
| 105 Plethora. | 109 Phlegmatia |
| 106 Polyfarcia. | 110 Physconia |
| 107 Pneumatosis | 111 Graviditas. |
| 108 Anasarca | |

ORD. III. *HYDROPEs partiales.*

- | | |
|-------------------|------------------|
| 112 Hydrocephalus | 116 Hydrometra |
| 113 Physocephalus | 117 Phylometra |
| 114 Hydrorachitis | 118 Tympanites |
| 115 Ascites | 119 Meteorismus. |

ORD. IV. *TUBERA.*

- | | |
|---------------|----------------|
| 120 Rachitis | 123 Leontiasis |
| 121 Scrofula | 124 Malis |
| 122 Carcinoma | 125 Frambœsia. |

ORD. V. *IMPETIGINES.*

- | | |
|-------------------|-------------|
| 126 Syphilis | 129 Lepra |
| 127 Scorbutus | 130 Scabies |
| 128 Elephantiasis | 131 Tinea. |

ORD. VI. *ICTERITIÆ.*

- | | |
|------------------|----------------|
| 132 Aurigo | 134 Phœnigmus |
| 133 Melasicterus | 135 Chlorosis. |

ORD. VII. *ANOMALÆ.*

- | | |
|-----------------|---------------|
| 136 Phthiriasis | 139 Elcosis |
| 137 Trichoma | 140 Gangræna |
| 138 Alopecia | 141 Necrosis. |

CLASS IV. DOLORES.

ORD. I. *VAGI.*

- | | |
|------------------|---------------|
| 142 Arthritis | 147 Lassitudo |
| 143 Ostocopus | 148 Stupor |
| 144 Rheumatismus | 149 Pruritus |
| 145 Catarrhus. | 150 Algor |
| 146 Anxietas | 151 Ardor |

ORD. II. *CAPITIS.*

- | | |
|-----------------|-----------------|
| 152 Cephalalgia | 155 Ophthalmia |
| 153 Cephalæa | 156 Otagia |
| 154 Hemicrania | 157 Odontalgia. |

ORD. III. *PECTORIS.*

158 Pyrosis

159 Cardiognus.

ORD. IV. *ABDOMINIS.*

160 Cardialgia

164 Splenalgia

161 Gastrodynia

165 Nephralgia

162 Colica

166 Hysteralgia.

163 Hepatalgia

ORD. V. *EXTERNARUM.*

167 Mastodynia

171 Proctalgia

168 Rachialgia

172 Pudendagra.

169 Lumbago

173 Digitium.

170 Ischias.

CLASS V. *FLUXUS.*ORD. I. *SANGUIFLUXUS.*

174 Hæmorrhagia.

178 Hæmaturia

175 Hæmoptysis

179. Metrorrhagia

176 Stomacace

180 Abortus.

177 Hæmatemesis.

ORD. II. *ALVI FLUXUS sanguinolenti.*

181 Hepatirrhœa

183 Dysenteria

182 Hæmorrhœis

184 Melæna.

ORD. III. *ALVI FLUXUS non sanguinolenti.*

185 Nausea

190 Coeliaca

186 Vomitus

191 Lienteria

187 Ileus

192 Tenesmus

188 Cholera

193 Proctorrhœa.

189 Diarrhœa

ORD. IV. *SERIFLUXUS.*

194 Ephidrosis

196 Coryza

195 Epiphora

197 Ptyalismus

198 Anacatharsis	203 Lochiorrhœa
199 Diabetes	204 Gonorrhœa
200 Enuresis	205 Galactorrhœa
201 Pyuria	206 Otorrhœa.
202 Leucorrhœa	

ORD. V. *AERIFLUXUS.*

207 Flatulentia	209 Dyfodia.
208 Ædosophia	

CLASS VI. SUBPRESSIONES.

ORD. I. *EGERENDORUM.*

210 Adiapneustia	213 Dysuria
211 Sterilitas	214 Aglactatio
212 Ischuria	215 Dyslochia.

ORD. II. *INGERENDORUM.*

216 Dysphagia	217 Angina.
---------------	-------------

ORD. III. *IMI VENTRIS.*

218 Dysmenorrhœa	220 Dyshæmorrhœis
219 Dyftocia	221 Obstipatio.

CLASS VII. SPASMI.

ORD. I. *TONICI PARTIALES.*

222 Strabismus	225 Contractura
223 Trismus	226 Crampus
224 Obstipitas	227 Priapismus.

ORD. II. *TONICI GENERALES.*

228 Tetanus	229 Catochus.
-------------	---------------

ORD. III. *CLONICI PARTIALES.*

- | | |
|------------------|------------------|
| 230 Nyctagmus | 235 Convulsio |
| 231 Carphologia | 236 Tremor |
| 232 Subfultus | 237 Palpitatio |
| 233 Pandiculatio | 238 Claudicatio. |
| 234 Apomyotofis | |

ORD. IV. *CLONICI GENERALES.*

- | | |
|-----------------|----------------|
| 239 Phricasinus | 242 Hysteria |
| 240 Eclampsia | 243 Scelotyrbe |
| 241 Epilepsia | 244 Beriberia. |

CLASS VIII. *ANHELATIONES.*ORD. I. *SPASMODICÆ.*

- | | |
|-----------------|---------------|
| 245 Ephialtes | 248 Singultus |
| 246 Sternutatio | 249 Tussis. |
| 247 Oscedo | |

ORD. II. *SUPPRESSIVÆ.*

- | | |
|---------------|-----------------|
| 250 Stertor | 254 Pleurodyne |
| 251 Dyspnœa | 255 Rheuma. |
| 252 Asthma | 256 Hydrothorax |
| 253 Orthopnœa | 257 Empyema. |

CLASS IX. *DEBILITATES.*ORD. I. *DYSÆSTHESIÆ.*

- | | |
|---------------|----------------|
| 258 Amblyopia | 263 Agheusia |
| 259 Caligo | 264 Dysecocœa |
| 260 Cataracta | 265 Paracusis. |
| 261 Amaurosis | 266 Cophosis |
| 262 Anosmia. | 267 Anæsthesia |

ORD. II. *ANEPITHYMIÆ.*

- | | |
|--------------|-------------------|
| 268 Anorexia | 270 Anaphrodyfia. |
| 269 Adipsia | |

ORD. III. *DYSCINESIÆ.*

- | | |
|-----------------|-----------------|
| 271 Mutitas | 275 Paralyfis |
| 272 Aphonia | 276 Hemiplegia |
| 273 Pfellismus. | 277 Paraplexia. |
| 274 Cacophonia | |

ORD. IV. *LEIPOPSYCHIÆ.*

- | | |
|----------------|---------------|
| 278 Asthenia | 280 Syncope |
| 279 Lipothymia | 281 Asphyxia. |

ORD. V. *COMATA.*

- | | |
|----------------|----------------|
| 282 Catalepfis | 286 Cataphora |
| 283 Ecstafis | 287 Carus |
| 284 Typhomania | 288 Apoplexia. |
| 285 Lethargus | |

CLASS X. EXANTHEMATA.

ORD. I. *CONTAGIOSA.*

- | | |
|---------------|-----------------|
| 289 Pestis | 292 Purpura |
| 290 Variola | 293 Rubeola |
| 291 Pemphigus | 294 Scarlatina. |

ORD. II. *NON CONTAGIOSA.*

- | | |
|----------------|-------------|
| 295 Miliaris | 297 Effera |
| 296 Erysipelas | 298 Aphtha. |

CLASS XI. PHLEGMASIÆ.

ORD. I. *MUSCULOSÆ.*

- | | |
|---------------|---------------|
| 299 Phlegmone | 301 Myofitis |
| 300 Cynanche | 302 Carditis. |

ORD. II. *MEMBRANACEÆ.*

303 Phrenitis	307 Enteritis
304 Diaphragmitis	308 Epiploitis
305 Pleuritis	309 Cystitis.
306 Gastritis	

ORD. III. *PARENCHYMATOSÆ.*

310 Cephalitis	313 Splenitis
311 Peripneumonia	314 Nephritis
312 Hepatitis	315 Metritis.

CLASS XII. FEBRES.

ORD. I. *CONTINUÆ.*

316 Judicatoria	319 Typhus
317 Humoraria	320 Hæctica.
318 Frigeraria	

ORD. II. *REMITTENTES.*

321 Amphimerina	323 Tetartophya.
322 Tritæophya	

ORD. III. *INTERMITTENTES.*

324 Quotidiana	326 Quartana
325 Tertiana	327 Erratica.

CLASS XIII. VESANIÆ.

ORD. I. *HALLUCINATIONES.*

328 Vertigo	331 Syrigmos
329 Suffusio	332 Hypochondriasis
330 Diplopia	333 Somnambulismus.

ORD. II. *MOROSITATES.*

- | | | | |
|-----|------------|-----|-------------|
| 334 | Pica | 340 | Satyriasis |
| 335 | Bulimia | 341 | Nymphomania |
| 336 | Polydipsia | 342 | Tarantismus |
| 337 | Antipathia | 343 | Hydrophobia |
| 338 | Nostalgia | 344 | Rabies. |
| 339 | Panophobia | | |

ORD. III. *DELIRIA.*

- | | | | |
|-----|--------------|-----|-------------|
| 345 | Paraphrosyne | 348 | Dæmonomania |
| 346 | Amentia | 349 | Mania. |
| 347 | Melancholia | | |

ORD. IV. *ANOMALÆ.*

- | | | | |
|-----|---------|-----|-----------|
| 350 | Amnesia | 351 | Agrypnia. |
|-----|---------|-----|-----------|

SYNOPTICAL VIEW

OF THE

SYSTEM OF DR. MACBRIDE

IN the year 1772 appeared a system of practice by Dr. Macbride, of Dublin; and, connected with it, an appropriate Nosology was formed by him. It circumscribes the classes to four, and also the orders in a similar proportion.

CLASS I. UNIVERSAL DISEASES.

ORD. I. *FEVERS.*

- | | |
|----------------|------------|
| 1 Continued | 4 Eruptive |
| 2 Intermittent | 5 Hectic. |
| 2 Remittent | |

ORD. II. *INFLAMMATIONS.*

- | | |
|------------|-------------|
| 6 External | 7 Internal. |
|------------|-------------|

ORD. III. *FLUXES.*

- | | |
|--------------|-----------------------|
| 8 Alvine | 10 Humoral discharge. |
| 9 Hæmorrhage | |

ORD. IV. *PAINFUL DISEASES.*

- | | |
|---------------|--------------|
| 11 Gout | 13 Ostocopus |
| 12 Rheumatism | 14 Head-ach |

CLASSIFICATION

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- | | |
|------------------------|----------------|
| 15 Tooth-ach | 19 Colic |
| 16 Ear-ach | 20 Lithiasis |
| 17 Pleurodyne | 21 Ischuria |
| 18 Pain in the stomach | 22 Proctalgia. |

ORD. V. SPASMODIC DISEASES.

- | | |
|----------------|----------------|
| 23 Tetanus | 27 Convulsion |
| 24 Catochus | 28 Epilepsy |
| 25 Locked-jaw | 29 Eclampsia |
| 26 Hydrophobia | 30 Hieranofos. |

ORD. VI. WEAKNESS and PRIVATIONS.

- | | |
|----------|--------------|
| 31 Coma | 33 Fainting. |
| 32 Palsy | |

ORD. VII. ASTHMATIC DISORDERS.

- | | |
|--------------|----------------|
| 34 Dyspnœa | 37 Hydrothorax |
| 35 Orthopnœa | 38 Empyema. |
| 36 Asthma | |

ORD. VIII. MENTAL DISEASES.

- | | |
|----------|-----------------|
| 39 Mania | 40 Melancholia. |
|----------|-----------------|

ORD. IX. CACHEXIES, or Humoral Diseases.

- | | |
|---------------|------------------|
| 41 Corpulency | 48 Osteofarcosis |
| 42 Dropsy | 49 Sarcoftosis |
| 43 Jaundice | 50 Mortification |
| 44 Emphyema | 51 Scurvy |
| 45 Tympany | 52 Scrofula |
| 46 Physconia | 53 Cancer |
| 47 Atrophia | 54 Lues Venerea. |

CLASS II. LOCAL DISEASES.

ORD. I. OF THE INTERNAL SENSES.

- | | |
|--------------------|----------------------|
| 55 Loss of Memory | 57 Loss of Judgment. |
| 56 Hypochondriasis | |



ORD. II. *OF THE EXTERNAL SENSES.*

- | | |
|---------------------|---------------------|
| 58 Blindness | 63 Depraved Smell |
| 59 Depraved Sight | 64 Loss of Taste |
| 60 Deafness | 65 Depraved Taste |
| 61 Depraved Hearing | 66 Loss of Feeling. |
| 62 Loss of Smell | |

ORD. III. *OF THE APPETITES.*

- | | |
|---------------|------------------|
| 67 Anorexia | 71 Satyriasis |
| 68 Cynorexia | 72 Nymphomania |
| 69 Pica | 73 Anaphrodisia. |
| 70 Polydypsia | |

ORD. IV. *OF THE SECRETIONS AND EXCRETIONS.*

- | | |
|-----------------------------|-----------------|
| 74 Epiphora | 81 Pyuria |
| 75 Coryza | 82 Dysuria |
| 76 Ptyalism | 83 Constipation |
| 77 Anacatharsis | 84 Tenesmus |
| 78 Otorrhœa | 85 Dysodia |
| 79 Diarrhœa | 86 Flatulence |
| 80 Incontinence of
Urine | 87 Cœdosophia. |

ORD. V. *IMPEDING DIFFERENT ACTIONS.*

- | | |
|---------------------------------|-----------------|
| 88 Aphonia | 99 Corea |
| 89 Mutitas | 100 Trismus |
| 90 Paraphonia | 101 Nyctagmus |
| 91 Dysphagia | 102 Cramp |
| 92 Wry-neck | 103 Scelotyrbe |
| 93 Angone | 104 Contraction |
| 94 Sneezing | 105 Paralysis |
| 95 Hiccup | 106 Anchylosis |
| 96 Cough | 107 Gibbositas |
| 97 Vomiting | 108 Lordosis |
| 98 Palpitation of the
Heart. | 109 Hydarthrus. |

ORD. VI. *OF THE EXTERNAL HABIT.*

- | | |
|-----------------|-------------------|
| 110 Tumor | 119 Leprosy |
| 111 Excrescence | 120 Elephantiasis |

- | | |
|-----------------------|------------------|
| 112 Aneurism | 121 Framboesia |
| 113 Varix | 122 Herpes |
| 114 Papulæ | 123 Maculæ |
| 115 Phlycthenæ | 124 Alopecia |
| 116 Pustulæ | 125 Trichoma |
| 117 Scabies, or Pfora | 126 Scald Head |
| 118 Impetigo | 127 Phthiriasis. |

ORD. VII. DISLOCATIONS.

- | | |
|---------------|---------------|
| 128 Hernia | 130 Luxation. |
| 129 Prolapsus | |

ORD. VIII. SOLUTIONS OF CONTINUITY.

- | | |
|-------------|-------------------|
| 131 Wound | 135 Burn or Scald |
| 132 Ulcer | 136 Excoriation |
| 133 Fissure | 137 Fracture |
| 134 Fistula | 138 Caries. |

CLASS III. SEXUAL DISEASES.

ORD. I. GENERAL, proper to Men.

- | | |
|-------------------------|--------------------|
| 139 Febris Testicularis | 140 Tabes Dorsalis |
|-------------------------|--------------------|

ORD. II. LOCAL, proper to Men.

- | | |
|-------------------------|----------------------|
| 141 Dyspermatismus | 146 Paraphymosis |
| 142 Gonorrhœa simplex | 147 ChrySTALLINE |
| 143 Gonorrhœa virulenta | 148 Hernia Humoralis |
| 144 Priapism | 149 Hydrocele |
| 145 Phymosis | 150 Sarcocoele |
| | 151 Cirfocele. |

ORD. III. GENERAL, proper to Women.

- | | |
|-----------------|------------------------|
| 152 Amenorrhœa | 157 Graviditas |
| 153 Chlorosis | 158 Abortus |
| 154 Leucorrhœa | 159 Dyslocia |
| 155 Menorrhagia | 160 Febris puerperalis |
| 156 Hysteralgia | 161 Mastodynia. |

ORD. IV. *LOCAL, proper to Women.*

- | | |
|---------------------|---------------------|
| 162 Hydrops ovarii | 166 Prolapsus uteri |
| 163 Scirrhus ovarii | 167 ———— vaginæ |
| 164 Hydrometra | 168 Polypus Uteri |
| 165 Phyfometra | |

CLASS IV. INFANTILE DISEASES.

ORD. I. *GENERAL.*

- | | |
|-----------------------|---------------|
| 169 Colica meconialis | 272 Aphthæ |
| 170 Colica lacten- | 173 Eclampsia |
| tium. | 174 Atrophia |
| 171 Diarrhœa infan- | 175 Rachitis. |
| tum | |

ORD. II. *LOCAL.*

- | | |
|--------------------|--------------------|
| 176 Imperforation. | 179 Purpura |
| 177 Anchyloglossum | 181 Crusta Lactea. |
| 178 Aurigo | |

Dr. Macbride's system was succeeded by that of Dr. Cullen, a man faulty as a theorist, but whose History of Diseases and System of Nosology, the fruit of accurate observation, will remain the lasting monuments of his fame. Before examining his system, we shall consider more modern one, or that of Dr. Darwin.

V I E W

OF THE

SYSTEM OF DR. DARWIN.

IN his introduction to the *Zoönomia*, an arrangement of diseases is formed by Dr. Darwin on philosophical principles; and more splendid therefore, and complex in its structure, than useful in its application to practice. It is divided into four general Classes, under the names of Diseases of Irritation, Diseases of Sensation, Diseases of Volition, and Diseases of Association; and these undergo their various sub-divisions in the following manner:—

CLASS I.

DISEASES OF IRRITATION.

ORD. I. INCREASED IRRITATION.

GENUS I.—With increased Actions of the Sanguiferous System.

Sp. 1. <i>Febris irritativa</i>	Irritative fever
2. <i>Ebrietas</i>	Drunkennes
3. <i>Hæmorrhagia arteriosa</i>	Arterial hæmorrhage
4. <i>Hæmoptoe arteriosa</i>	Spitting of arterial blood
5. <i>Hæmorrhagia narium</i>	Bleeding from the nose.

GENUS II.—With increased Actions of the Secerning System.

Sp. 1. <i>Calor febrilis</i>	Febrile heat
2. <i>Rubor febrilis</i>	Febrile redness
3. <i>Sudor calidus</i>	Warm sweat
— <i>febrilis</i>	Sweat in fevers
— <i>a labore</i>	— from exercise
— <i>ab igne</i>	— from fire
— <i>a medicamentis</i>	— from medicines
4. <i>Urina uberius colorata</i>	Copious coloured urine
5. <i>Diarrhœa calida</i>	Warm diarrhœa
— <i>febrilis</i>	— from fever
— <i>crapulosa</i>	— from indigestion
— <i>infantum</i>	— of infants
6. <i>Salivatio calida</i>	— salivation
7. <i>Catarrhus calidus</i>	— catarrh
8. <i>Expectoratio calida</i>	— expectoration
9. <i>Exsudatio pone aures</i>	Discharge behind the ears
10. <i>Gonorrhœa calida</i>	Warm gonorrhœa
11. <i>Fluor albus calidus</i>	— fluor albus
12. <i>Hæmorrhœis alba</i>	White piles
13. <i>Serum e vesicatorio</i>	Discharge from a blister
14. <i>Perspiratio fœtida</i>	Fetid perspiration
15. <i>Crines novi</i>	New hairs.

GENUS III.—With increased Actions of the Absorbent System.

Sp. 1. <i>Lingua arida</i>	Dry tongue
2. <i>Fauces aridæ</i>	Dry throat
3. <i>Nares aridi</i>	Dry nostrils
4. <i>Expectoratio solida</i>	Solid expectoration
5. <i>Constipatio alvi</i>	Costiveness
6. <i>Cutis arida</i>	Dry skin
7. <i>Urina paucior colorata</i>	Diminished coloured urine

- | | |
|---------------------------------------|-------------------------|
| 8. <i>Calculus felleus et icterus</i> | Gall-stone and jaundice |
| 9. ——— - <i>renis</i> | Stone of the kidney |
| 10. ——— - <i>vesicæ</i> | Stone of the bladder |
| 11. ——— - <i>arthriticus</i> | Gout-stone |
| 12. <i>Rheumatismus chronicus</i> | Chronic rheumatism |
| 13. <i>Cicatrix vulnerum</i> | Healing of ulcers |
| 14. <i>Corneæ obfuscatio</i> | Scar on the cornea. |

GENUS IV.—With increased Actions of other Cavities and Membranes.

- | | |
|-------------------------------------|---------------------------|
| Sp. 1. <i>Nictitatio irritativa</i> | Irritative nictitation |
| 2. <i>Deglutitio irritativa</i> | Irritative deglutition |
| 3. <i>Respiratio et tussis</i> | Respiration and cough |
| 4. <i>Exclusio bilis</i> | Exclusion of the bile |
| 5. <i>Dentitio</i> | Toothing |
| 6. <i>Priapismus</i> | Priapism |
| 7. <i>Distensio mamularum</i> | Distension of the nipples |
| 8. <i>Descensus uteri</i> | Descent of the uterus |
| 9. <i>Prolapsus ani</i> | Descent of the rectum |
| 10. <i>Lumbricus</i> | Round worm |
| 11. <i>Tenia</i> | Tape-worm. |
| 12. <i>Ascarides</i> | Thread-worms. |
| 13. <i>Dracunculus</i> | Guinea-worm |
| 14. <i>Morpiones</i> | Crab-lice |
| 15. <i>Pediculi</i> | Lice. |

GENUS V.—With increased Actions of the Organs of Sense.

- | | |
|----------------------------|--------------|
| Sp. 1. <i>Visus acrior</i> | Acuter sight |
| 2. <i>Auditus acrior</i> | ———— hearing |
| 3. <i>Olfactus acrior</i> | ———— smell |
| 4. <i>Gustus acrior</i> | ———— taste |
| 5. <i>Tactus acrior</i> | ———— touch |

6. <i>Sensus caloris acrior</i>	Acute sense of heat
7. ——— <i>extensionis acrior</i>	——— sense of extension
8. <i>Titillatio</i>	Tickling
9. <i>Pruritus</i>	Itching
10. <i>Dolor urens</i>	Smarting
11. <i>Consternatio</i>	Surprise.

ORD. II. DECREASED IRRITATION.

GENUS I.—With decreased Actions of the Sanguiferous System.

Sp. 1. <i>Febris inirritativa</i>	Inirritative fever
2. <i>Paresis inirritativa</i>	——— debility
3. <i>Somnus interruptus</i>	Interrupted sleep
4. <i>Syncope</i>	Fainting
5. <i>Hæmorrhagia venosa</i>	Venous hæmorrhage
6. <i>Hæmorrhoids cruenta</i>	Bleeding piles
7. <i>Hæmorrhagia renum</i>	——— from the kidneys
8. ——— <i>hepatis</i>	——— from the liver
9. <i>Hæmoptoe venosa</i>	Spitting of venous blood
10. <i>Palpitatio cordis</i>	Palpitation of the heart
11. <i>Menorrhagia</i>	Exuberant menstruation
12. <i>Dysmenorrhagia</i>	Deficient menstruation
13. <i>Lochia nimia</i>	Too great lochia
14. <i>Abortio spontanea</i>	Spontaneous abortion
15. <i>Scorbutus</i>	Scurvy
16. <i>Vibices</i>	Extravasations of blood
17. <i>Petechiæ</i>	Purple spots.

GENUS II.—With decreased Actions of the Secerning System.

Sp. 1. <i>Frigus febrile</i>	Coldness in fevers
——— <i>chronicum</i>	——— permanent
2. <i>Pallor fugitivus</i>	Paleness fugitive
——— <i>permanens</i>	——— permanent
3. <i>Pus parcius</i>	Diminished pus
4. <i>Mucus parcius</i>	Diminished mucus
5. <i>Urina parcius pallida</i>	Pale diminished urine
6. <i>Torpor hepaticus</i>	Torpor of the liver
7. <i>Torpor pancreatis</i>	Torpor of the pancreas
8. <i>Torpor renis</i>	Torpor of the kidney
9. <i>Punctæ mucosæ vultus</i>	Mucous spots on the face
10. <i>Macula cutis fulvæ</i>	Tawny blots on the skin
11. <i>Canities</i>	Grey hairs
12. <i>Callus</i>	Callus
13. <i>Cataracta</i>	Cataract
14. <i>Innutritio ossium</i>	Innutrition of the bones
15. <i>Rachitis</i>	Rickets
16. <i>Spina distortio</i>	Distortion of the spine
17. <i>Claudicatio coxaria</i>	Lameness of the hip
18. <i>Spina protuberans</i>	Protuberant spine
19. <i>Spina bifida</i>	Divided spine
20. <i>Defectus palati</i>	Defect of the palate.

GENUS III.—With decreased Actions of the Absorbent System.

Sp. 2. <i>Mucus faucium frigidus</i>	Cold mucus from the throat
2. <i>Sudor frigidus</i>	—— sweat
3. <i>Catarrhus frigidus</i>	—— catarrh
4. <i>Expectoratio frigida</i>	—— expectoration
5. <i>Urina uberior pallida</i>	Copious pale urine

6. <i>Diarrhœa frigida</i>	Cold diarrhœa
7. <i>Fluor albus frigidus</i>	— fluor albus
8. <i>Gonorrhœa frigida</i>	— gonorrhœa
9. <i>Hepatis tumor</i>	Swelling of the liver
10. <i>Chlorosis</i>	Green sickness
11. <i>Hydrocele</i>	Dropsy of the vagina testis
12. <i>Hydrocephalus internus</i>	— of the brain
13. <i>Ascites</i>	— of the belly
14. <i>Hydrothorax</i>	— of the chest
15. <i>Hydrops ovarii</i>	— of the ovary
16. <i>Anasarca pulmonum</i>	— of the lungs
17. <i>Obesitas</i>	Corpulency
18. <i>Splenis tumor</i>	Swelling of the spleen
19. <i>Genu tumor albus</i>	White swelling of the knee
20. <i>Bronchocele</i>	Swelled throat
21. <i>Scrofula</i>	King's evil
22. <i>Schirrus</i>	Schirrus
23. — recti	— of the rectum
24. — urethræ	— of the urethra
25. — œsophagi	— of the throat
26. <i>Lacteorum inirritabilitas</i>	Inirritability of the lacteals
27. <i>Lymphaticorum inirritabilitas</i>	Inirritability of the lymphatics.

GENUS IV.—With decreased Actions of other Cavities and Membranes.

Sp. 1. <i>Sitis calida</i>	Thirst warm
— <i>frigida</i>	— cold
2. <i>Esuries</i>	Hunger
3. <i>Nausea sicca</i>	Dry nausea
4. <i>Ægitudine ventriculi</i>	Sickness of stomach
5. <i>Cardialgia</i>	Heartburn
6. <i>Arthritis ventriculi</i>	Gout of the stomach
7. <i>Colica flatulenta</i>	Flatulent colic
8. <i>Colica saturnina</i>	Colic from lead
9. <i>Tympanitis</i>	Tympany

10. <i>Hypochondriasis</i>	Hypochondriacism
11. <i>Cephalæa frigida</i>	Cold head-ach
12. <i>Odontalgia</i>	Tooth-ach
13. <i>Otalgia</i>	Ear-ach
14. <i>Pleurodyne chronica</i>	Chronical pain of the side
15. <i>Sciatica frigida</i>	Cold sciatica
16. <i>Lumbago frigida</i>	— lumbago
17. <i>Hysteralgia frigida</i>	— pain of the uterus
18. <i>Proctalgia frigida</i>	— pain of the rectum
19. <i>Vesicæ felleæ inirritabilitas et icterus</i>	Inirritability of the gall-bladder and jaundice.

GENUS V.—With decreased Actions of the Organs of Sense.

Sp. 1. <i>Stultitia inirritabilis</i>	Folly from inirritability
2. <i>Visus imminutus</i>	Impaired vision
3. <i>Muscæ volitantes</i>	Dark moving specks
4. <i>Strabismus</i>	Squinting
5. <i>Amaurosis</i>	Palsy of the optic nerve
6. <i>Auditus imminutus</i>	Impaired hearing
7. <i>Olfactus imminutus</i>	— smell
8. <i>Gustus imminutus</i>	— taste
9. <i>Tactus, imminutus</i>	— touch
10. <i>Stupor</i>	Stupor.

ORD. III. RETROGRADE IRRITATIVE MOTIONS.

GENUS I.—Of the Alimentary Canal.

Sp. 1. <i>Ruminatio</i>	Chewing the cud
2. <i>Ructus</i>	Eruetation
3. <i>Apepsia</i>	Indigestion, water-qualm
4. <i>Vomitus</i>	Vomiting
5. <i>Cholera</i>	Cholera
6. <i>Ileus</i>	Iliac passino

7. <i>Globus hystericus</i>	Hysteric strangulation
8. <i>Vomendi conamen inane</i>	Vain efforts to vomit
9. <i>Borborismus</i>	Gurgling of the bowels
10. <i>Hysteria</i>	Hysteric disease
11. <i>Hydrophobia</i>	Dread of water.

GENUS II.—Of the Absorbent System.

Sp. 1. <i>Catarrhus lymphaticus</i>	Lymphatic catarrh
2. <i>Salivatio lymphatica</i>	Lymphatic salivation
3. <i>Nausea humida</i>	Moist nausea
4. <i>Diarrhœa lymphatica</i>	Lymphatic flux
5. <i>Diarrhœa chylifera</i>	Flux of chyle
6. <i>Diabætes</i>	Diabetes
7. <i>Sudor lymphaticus</i>	Lymphatic sweat
8. <i>Sudor asthmaticus</i>	Asthmatic sweat
9. <i>Translatio puris</i>	Translatation of matter
10. ——— <i>lactis</i>	——— of milk
11. ——— <i>urinæ</i>	——— of urine.

GENUS III.—Of the Sanguiferous System.

Sp. 1. <i>Capillarium motus retrogressus</i>	Retrograde motion of the capillaries
2. <i>Palpitatio cordis</i>	Palpitation of the heart
3. <i>Anhelatio spasmodica</i>	Spasmodic panting.

CLASS II.

DISEASES OF SENSATION.

ORD. I.—INCREASED SENSATION.

GENUS I.—With increased Action of the Muscles.

Sp. 1. <i>Deglutitio</i>	Deglutition
2. <i>Respiratio</i>	Respiration
3. <i>Sternutatio</i>	Sneezing
4. <i>Anbelitus</i>	Panting
5. <i>Tussis ebriorum</i>	Cough of inebriates
6. <i>Syngultus</i>	Hiccough
7. <i>Asthma humorale</i>	Humoral asthma
8. <i>Nictitatio sensitiva</i>	Winking from pain
9. <i>Oscitatio et pandiculatio</i>	Yawning and stretching
10. <i>Tenesmus</i>	Tenesmus
11. <i>Stranguria</i>	Strangury
12. <i>Parturitio</i>	Parturition.

GENUS II.—With the Production of new Vessels by internal Membranes or Glands, with Fever.

Sp. 1. <i>Febris sensitiva irritata</i>	Sensitive irritated fever
2. <i>Ophthalmia interna</i>	Inflammation of the eye
3. <i>Phrenitis</i>	_____ of the brain
4. <i>Peripneumonia.</i>	_____ of the lungs
_____ <i>trachea-</i>	_____ the croup
<i>lis</i>	

5. <i>Pleuritis</i>	Inflammation of the pleura
6. <i>Diaphragmatitis</i>	_____ of the dia- phragm
7. <i>Carditis</i>	_____ of the heart
8. <i>Peritonitis</i>	_____ of the perito- neum
9. <i>Mesenteritis</i>	_____ of the mesen- tery
10. <i>Gastritis</i>	_____ of the stomach
11. <i>Enteritis</i>	_____ of the bowels
12. <i>Hepatitis</i>	_____ of the liver
13. <i>Splenitis</i>	_____ of the spleen
14. <i>Nephritis</i>	_____ of the kidney
15. <i>Cystitis</i>	_____ of the bladder
16. <i>Hysteritis</i>	_____ of the womb
17. <i>Lumbago sensitiva</i>	_____ of the loins
18. <i>Ischias</i>	_____ of the pelvis
19. <i>Paronychia interna</i>	_____ beneath the nails.

GENUS II.—With the Production of new Vessels by external Membranes or Glands, with Fever.

Sp. 1. <i>Febris sensitiva inirritata</i>	Sensitive inirritated fever
2. <i>Erysipelas irritatum</i>	Erysipelas irritated
_____ <i>inirritatum</i>	_____ inirritated
_____ <i>sensitivum</i>	_____ sensitive
3. <i>Tonsillitis interna</i>	Angina internal
_____ <i>superficialis</i>	_____ superficial
_____ <i>inirritata</i>	_____ inirritated
4. <i>Parotitis suppurans</i>	Mumps suppurative
_____ <i>mutabilis</i>	_____ mutable
_____ <i>filina</i>	_____ of cats
5. <i>Catarrhus sensitiva</i>	Catarrh inflammatory
6. _____ <i>contagiosus</i>	_____ contagious
_____ <i>equinus et</i>	_____ among horses and
_____ <i>caninus</i>	_____ dogs

7. <i>Peripneumonia superficialis</i>	Superficial peripneumony
8. <i>Pertussis</i>	Chincough
9. <i>Variola discreta</i>	Small-pox distinct
—— <i>confluens</i>	—— confluent
—— <i>inoculata</i>	—— inoculated
10. <i>Rubeola irritata</i>	Measles irritated
—— <i>inirritata</i>	—— inirritated
11. <i>Scarlatina mitis</i>	Scarlet fever mild
—— <i>maligna</i>	—— malignant
12. <i>Miliaria sudatoria</i>	Miliary fever sudatory
—— <i>irritata</i>	—— irritated
—— <i>inirritata</i>	—— inirritated
13. <i>Pestis</i>	Plague
—— <i>vaccina</i>	—— of horned cattle
14. <i>Pemphigus</i>	Bladdery fever
15. <i>Varicella</i>	Chicken-pox
16. <i>Urticaria</i>	Nettle-rash
17. <i>Aphtha sensitiva</i>	Thrush sensitive
—— <i>irritata</i>	—— irritated
—— <i>inirritata</i>	—— inirritated
18. <i>Dysenteria</i>	Bloody flux
19. <i>Gastritis superficialis</i>	Superficial inflam. of the stomach
20. <i>Enteritis superficialis</i>	—— of the bowels.

GENUS IV.—With the Production of new Vessels by internal Membranes or Glands, without Fever.

1. <i>Ophthalmia superficialis</i>	Ophthalmmy superficial
—— <i>lymphatica</i>	—— lymphatic
—— <i>equina</i>	—— of horses
2. <i>Pterigion</i>	Eye-wing
3. <i>Tarbitis palpebrarum</i>	Red eye-lids
4. <i>Hordeolum</i>	Stye
5. <i>Paronychia superficialis</i>	Whitlow

6. <i>Gutta rosea hepatica</i>	Pimpled face hepatic
— <i>stomatice</i>	— stomatic
— <i>hereditaria</i>	— hereditary
7. <i>Odontitis</i>	Inflamed tooth
8. <i>Otitis</i>	— ear
9. <i>Fistula lacrymalis</i>	Fistula lacrymalis
10. <i>Fistula in ano</i>	Fistula in ano
11. <i>Hepatitis chronica</i>	Chronical hepatitis
12. <i>Scrofula suppurans</i>	Suppurating scrofula
13. <i>Scorbutus suppurans</i>	Suppurating scurvy
14. <i>Schirrus suppurans</i>	Suppurating schirrus
15. <i>Carcinoma</i>	Cancer
16. <i>Arthrocele</i>	Swelling of the joints
17. <i>Arthropuosis</i>	Suppuration of the joints
18. <i>Caries ossium</i>	Caries of the bones.

GENUS V.—With the Production of new Vessels by external Membranes or Glands, without Fever.

Sp. 1. <i>Gonorrhœa venerea</i>	Clap
2. <i>Syphilis</i>	Venereal disease
3. <i>Leprosy</i>	Leprosy
4. <i>Elephantiasis</i>	Elephantiasis
5. <i>Frambœsia</i>	Frambœsia
6. <i>Psores</i>	Itch
7. <i>Psores ebriorum</i>	Itch of drunkards
8. <i>Herpes</i>	Herpes
9. <i>Zona ignea</i>	Shingles
10. <i>Annulus repens</i>	Ring-worm
11. <i>Tinea capitis</i>	Scald-head
12. <i>Crusta lactea</i>	Milk-crust
13. <i>Trichoma</i>	Plica polonica.

GENUS VI.—With Fever consequent to the Production of new Vessels or Fluids.

Sp. 1. <i>Febris sensitiva</i>	Sensitive fever
2. ——— <i>a pure clauso</i>	Fever from concealed matter
3. ——— <i>a vomica</i>	—— from vomica
4. ——— <i>ab empyemate</i>	—— from empyema
5. ——— <i>mesenterica</i>	—— mesenteric
6. ——— <i>a pure aërato</i>	—— from aerated matter
7. ——— <i>a phthisi</i>	—— from consumption
8. ——— <i>scrofulosa</i>	—— scrofulous
9. ——— <i>ischiadica</i>	—— from ischias
10. ——— <i>arthropuodica</i>	—— from joint-evil
11. ——— <i>a pure contagioso</i>	—— from contagious matter
12. ——— <i>variolosa secundaria</i>	—— secondary of small-pox
13. ——— <i>carcinomatosa</i>	—— cancerous
14. ——— <i>venerea</i>	—— venereal
15. ——— <i>a sanie contagiosa</i>	—— from contagious sanies
16. ——— <i>puerpera</i>	—— puerperal
17. ——— <i>a sphacelo</i>	—— from sphacelus.

GENUS VII. With increased Action of the Organs of Sense.

Sp. 1. <i>Delirium febrile</i>	Delirium of fevers
2. ——— <i>maniacale</i>	—— maniacal
3. ——— <i>ebrietatis</i>	—— of drunkenness
4. <i>Somnium</i>	Dreams
5. <i>Hallucinatio visus</i>	Deception of sight
6. ——— <i>auditus</i>	—— of hearing
7. <i>Rubor a calore</i>	Blush from heat
8. ——— <i>jucunditalis</i>	—— from joy
9. <i>Priapismus amatorius</i>	Amorous priapism
10. <i>Distentio mamularum</i>	Distension of the nipples

ORD. II. DECREASED SENSATION.

GENUS I.—With decreased Action of the general System.

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|--------------------------------------|--------------------------|
| Sp. 1. <i>Stultitia insensibilis</i> | Folly from insensibility |
| 2. <i>Tædium vitæ</i> | Irkfomeness of life |
| 3. <i>Parejis sensitiva</i> | Sensitive debility. |

GENUS II.—With decreased Actions of particular Organs.

- | | |
|---------------------------------|------------------------------|
| 1. <i>Anorexia</i> | Want of appetite |
| 2. <i>Adipsia</i> | Want of thirst |
| 3. <i>Impotentia</i> | Impotence |
| 4. <i>Sterilitas</i> | Barrenness |
| 5. <i>Insensibilitas artuum</i> | Insensibility of the limbs |
| 6. <i>Dysuria insensitiva</i> | Insensibility of the bladder |
| 7. <i>Accumulatio alvina</i> | Accumulation of fæces |

ORD. III. RETROGRADE SENSITIVE MOTIONS.

GENUS I.—Of Excretory Ducts.

- | | |
|--------------------------------|-------------------------|
| <i>Motus retrogressus</i> | Retrograde motion |
| 1. ——— <i>ureterum</i> | ————— of the ureters |
| 2. ——— <i>urethræ</i> | ————— of the urethra. |
| 3. ——— <i>ductus choledoci</i> | ————— of the bile-duct. |

CLASS III.

DISEASES OF VOLITION.

ORD. I. INCREASED VOLITION.

GENUS I.—With increased Actions of the Muscles.

Sp. 1. <i>Jactitatio</i>	Restlessness
2. <i>Tremor febrilis</i>	Febrile trembling
3. <i>Clamor</i>	Screaming
4. <i>Risus</i>	Laughter
5. <i>Convulso</i>	Convulsion
——— <i>- debilis</i>	——— -- weak
6. ——— <i>- dolorifica</i>	——— -- painful
7. <i>Epilepsia</i>	Epilepsy
8. ——— <i>- dolorifica</i>	——— -- painful
9. <i>Somnambulismus</i>	Sleep-walking
10. <i>Asthma convulsivum</i>	Asthma convulsive
11. ——— <i>- dolorificum</i>	——— -- painful
12. <i>Stridor dentium</i>	Gnashing of the teeth
13. <i>Tetanus trismus</i>	Cramp of the jaw
14. ——— <i>- dolorificus</i>	——— -- painful
15. <i>Hydrophobia</i>	Dread of water

GENUS II.—With increased Actions of the Organs of Sense.

Sp. 1. <i>Mania mutabilis</i>	Mutable madness
2. <i>Studium inane</i>	Reverie
3. <i>Vigilia</i>	Watchfulness
4. <i>Erotomania</i>	Sentimental love
5. <i>Amor sui</i>	Vanity
6. <i>Nostalgia</i>	Desire of home
7. <i>Spes religiosa</i>	Superstitious hope
8. <i>Superbia stemmatis</i>	Pride of family
9. <i>Ambitio</i>	Ambition
10. <i>Mæror</i>	Grief
11. <i>Tædium vitæ</i>	Irkfomeness of life
12. <i>Desiderium pulchritudinis</i>	Loss of beauty
13. <i>Paupertatis timor</i>	Fear of poverty
14. <i>Lethi timor</i>	—— of death
15. <i>Orci timor</i>	—— of hell
16. <i>Satyriasis</i>	Lust
17. <i>Ira</i>	Anger
18. <i>Rabies</i>	Rage
19. <i>Citta</i>	Depraved appetite
20. <i>Cacositia</i>	Aversion to food
21. <i>Syphilis imaginaria</i>	Imaginary pox
22. <i>Pjora imaginaria</i>	—— itch
23. <i>Tabes imaginaria</i>	—— tabes
24. <i>Sympathia aliena</i>	Pity
25. <i>Educatio heroica</i>	Heroic education.

ORD. II. DECREASED VOLITION.

GENUS I.—With decreased Actions of the Muscles.

Sp. 1. <i>Lassitudo</i>	Fatigue
2. <i>Vacillatio senilis</i>	See, saw of old age
3. <i>Tremor senilis</i>	Tremor of old age
4. <i>Brachiorum paralysis</i>	Palsy of the arms
5. <i>Raucedo paralytica</i>	Paralytic hoarseness
6. <i>Vesicæ urinariæ paralysis</i>	Palsy of the bladder
7. <i>Recti paralysis</i>	Palsy of the rectum
8. <i>Paresis voluntaria</i>	Voluntary debility
9. <i>Catalepsis</i>	Catalepsy
10. <i>Hemiplegia</i>	Palsy of one side
11. <i>Paraplegia</i>	Palsy of the lower limbs
12. <i>Somnus</i>	Sleep
13. <i>Incubus</i>	Night-mare
14. <i>Lethargus</i>	Lethargy
15. <i>Syncope epileptica</i>	Epileptic fainting
16. <i>Apoplexia</i>	Apoplexy
17. <i>Mors a frigore</i>	Death from cold

GENUS II.—With decreased Actions of the Organs of Sense.

Sp. 1. <i>Recollectionis jactura</i>	Loss of recollection
2. <i>Stultitia voluntaria</i>	Voluntary folly
3. <i>Credulitas</i>	Credulity.

CLASS IV.

DISEASES OF ASSOCIATION.

ORD. I. INCREASED ASSOCIATE MOTIONS.

GENUS I.—Catenated with Irritative Motions.

Sp. 1. <i>Rubor vultus pransorum</i>	Flushing of the face after dinner
2. <i>Sudor stragulis immerforum</i>	Sweat from covering the face in bed
3. <i>Cessatio ægritudinis cute excitata</i>	Cure of sickness by stimulating the skin
4. <i>Digestio aucta frigore cutaneo</i>	Digestion increased by coldness of the skin
5. <i>Catarrhus a frigore cutaneo</i>	Catarrh from cold skin
6. <i>Absorptio cellularis aucta vomitu</i>	Cellular absorption increased by vomiting
7. <i>Syngultus nephriticus</i>	Nephritic hiccough
8. <i>Febris irritativa</i>	Irritative fever

GENUS II.—Catenated with Sensitive Motions.

Sp. 1. <i>Lacrymar. fluxus sympathicus</i>	Sympathetic tears
2. <i>Sternutatio a lumine</i>	Sneezing from light

3. <i>Dolor dentium a Stridore</i>	Tooth-edge from grating sounds
4. <i>Risus sardonius</i>	Sardonic smile
5. <i>Salivæ fluxus cibo viso</i>	Flux of saliva at sight of food
6. <i>Tensio mamularum viso puerulo</i>	Tension of the nipples of lactescent women at sight of the child
7. <i>Tensio penis in hydrophobia</i>	Tension of the penis in hydrophobia
8. <i>Tenesmus calculoso</i>	Tenesmus from stone
9. <i>Polypus narium ex ascaride</i>	Polypus of the nose from ascarides
10. <i>Crampus suarum in diarrhœa</i>	Cramp from diarrhœa
11. <i>Zona ignea nephritica</i>	Nephritic shingles
12. <i>Eruptio variolarum</i>	Eruption of small-pox
13. <i>Gutta rosea stomatica</i>	Stomatic rosy drop
14. ——— hepatica	Hepatic rosy drop
15. <i>Podagra</i>	Gout
16. <i>Rheumarismus</i>	Rheumatism
17. <i>Erysipelas</i>	Erysipelas
18. <i>Testium tumor in gonorrhœa</i>	Swelled testis in gonorrhœa
19. ——— in parotitide	———— in mumps.

GENUS III.—Catenated with Voluntary Motions.

Sp. 1. <i>Deglutitio invita</i>	Involuntary deglutition
2. <i>Nictitatio invita</i>	———— nictitation
3. <i>Risus invita</i>	———— laughter
4. <i>Lusus digitorum invitus</i>	———— actions with the fingers
5. <i>Unguium morsuncula invita</i>	———— biting the nails
6. <i>Vigilia invita</i>	———— watchfulness.

GENUS IV.—Catenated with External Influences.

Sp. 1. <i>Vita ovi</i>	Life of an egg
2. <i>Vita hiemi - dormientium</i>	Life of winter-sleepers
3. <i>Pullulatio arborum</i>	Budding of trees
4. <i>Orgasmatis venerei periodus</i>	Periods of venereal desire
5. <i>Brachii concussio electrica</i>	Electric shock through the arm
6. <i>Oxygenatio sanguinis</i>	Oxygenation of the blood
7. <i>Humectatio corporis</i>	Humectation of the body.

ORD. II. DECREASED ASSOCIATE MOTIONS.

GENUS I.—Catenated with Irritative Motions.

Sp. 1. <i>Cutis frigida pransorum</i>	Chillness after dinner
2. <i>Pallor urinæ pransorum</i>	Pale urine after dinner
3. ——— a frigore cutaneo	——— from cold skin
4. <i>Pallor ex ægritudine</i>	Paleness from sickness
5. <i>Dyspnoea a balneo frigido</i>	Shortness of breath from cold bathing
6. <i>Dyspepsia a pedibus frigidis</i>	Indigestion from cold feet
7. <i>Tussis a pedibus frigidis</i>	Cough from cold feet
8. ——— hepatica	Liver-cough
9. ——— arthritica	Gout-cough
10. <i>Vertigo rotatoria</i>	Vertigo rotatory
11. ——— visualis	——— visual
12. ——— ebriosa	——— inebriate
13. ——— febriculosa	——— feverish
14. ——— cerebrosa	——— from the brain
15. <i>Murmur aurium vertiginosum</i>	Noise in the ears

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|---|-------------------------------------|
| 16. <i>Tactus, gustus, olfactus vertiginosi</i> | Vertiginous touch, taste, smell |
| 17. <i>Pulsus mollis a vomitione</i> | Soft pulse in vomiting |
| 18. <i>—— intermittens a ventriculo</i> | Intermittent pulse from the stomach |
| 19. <i>Febris irritativa</i> | Irritative fever. |

GENUS II.—Catenated with Sensitive Motions.

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| Sp. 1. <i>Torpor genæ a dolore dentis</i> | Coldness of the cheek from tooth-ach |
| 2. <i>Stranguria a dolore vesicæ</i> | Strangury from pain of the bladder |
| 3. <i>—— convulsio</i> | Convulsive strangury |
| 4. <i>Dolor termini ductûs choledochi</i> | Pain of the end of the bile-duct |
| 5. <i>Dolor pharyngis abacido gastrico</i> | Pain of the throat from gastric acid |
| 6. <i>Pruritus narium a vermicibus</i> | Itching of the nose from worms |
| 7. <i>Cephalæa</i> | Head-ach |
| 8. <i>Hemicrania et otalgia</i> | Partial head-ach and ear-ach |
| 9. <i>Dolor humeri in hepaticide</i> | Pain of shoulder in hepatitis |
| 10. <i>Torpor pedum variolæ erumpente</i> | Cold feet in eruption of small-pox |
| 11. <i>Testium dolor nephriticus</i> | Nephritic pain of testis |
| 12. <i>Dolor digiti minimi sympathicus</i> | Pain of little finger from sympathy |
| 13. <i>Dolor brachii in hydrope pectoris</i> | Pain of the arm in dropsy of the chest |
| 14. <i>Diarrhœa a dentitione</i> | Diarrhœa from toothings. |

GENUS III.—Catenated with Voluntary Motions.

Sp. 1.	<i>Titubatio linguæ</i>	Impediment of speech
2.	<i>Chorea Sancti Viti</i>	St. Vitus's dance
3.	<i>Risus</i>	Laughter
4.	<i>Tremor ex irâ</i>	Trembling from anger
5.	<i>Rubor ex irâ</i>	Redness from anger
6.	—— <i>criminati</i>	Blush of guilt
7.	<i>Tarditas paralytica</i>	Slowness from palsy
8.	—— <i>senilis</i>	—— of age.

GENUS IV.—Catenated with External Influences.

Sp. 1.	<i>Somni periodus</i>	Periods of sleep
2.	<i>Studii inanis periodus</i>	—— of reverie
3.	<i>Hemicraniæ periodus</i>	—— of head-ach
4.	<i>Epilepsiæ dolorificæ periodus</i>	—— of painful epilepsy
5.	<i>Convulsionis dolorificæ periodus</i>	—— of painful convulsion
6.	<i>Tussis periodicæ periodus</i>	—— of periodic cough
7.	<i>Catamenia periodus</i>	—— of catamenia
8.	<i>Hæmorrhoidis periodus</i>	—— of the piles
9.	<i>Podagræ periodus</i>	—— of the gout
10.	<i>Erysipelatis periodus</i>	—— of erysipelas
11.	<i>Febrium periodus</i>	—— of fevers.

ORD. III.—RETROGRADE ASSOCIATE MOTIONS.

GENUS I.—Catenated with Irritative Motions.

Sp. 1. <i>Diabætes irritata</i>	Diabetes from irritation
2. <i>Sudor frigidus in asthma</i>	Cold sweat in asthma
3. <i>Diabætes a timore</i>	Diabetes from fear
4. <i>Diarrhœa a timore</i>	Diarrhœa from fear
5. <i>Pallor et tremor a timore</i>	Paleness and trembling from fear
6. <i>Palpitatio cordis a timore</i>	Palpitation of the heart from fear
7. <i>Abortio a timore</i>	Abortion from fear
8. <i>Hysteria a timore</i>	Hysterics from fear.

GENUS II.—Catenated with Sensitive Motions.

Sp. 1. <i>Nausea idealis</i>	Nausea from ideas
2. ——— <i>a conceptu</i>	Nausea from conception
3. <i>Vomitio vertiginosa</i>	Vomiting from vertigo
4. ——— <i>a calculo in uretere</i>	———— from stone in the ureter.
5. ——— <i>ab insultu paralytico</i>	———— from stroke of palsy
6. ——— <i>a titillatione faucium</i>	———— from tickling the throat
7. ——— <i>cute sympathetica</i>	———— from sympathy with the skin.

GENUS III.—Catenated with Voluntary Motions.

Sp. 1. <i>Ruminatio</i>	Rumination
2. <i>Vomitio voluntaria</i>	Voluntary vomiting
3. <i>Eructatio voluntaria</i>	————- eructation.

GENUS IV.—Catenated with External Influences.

Sp. 1. <i>Catarrhus periodicus</i>	Periodical catarrh
2. <i>Tussis periodica</i>	Periodic cough
3. <i>Hysteria a frigore</i>	Hysterics from cold
4. <i>Nausea pluvialis</i>	Sickness against rain.

The Nosographie Philosophique of Monsieur Pinel, and also the work of Ploucquet, we do not think of sufficient merit to require a detail.



VIEW

OF THE

SYSTEM OF DR. CULLEN.

HAVING discussed these different Systems of Nosology, which we consider as all faulty, in being too extended, and in having their distinctions often formed on opinion or theory rather than obvious fact, contrary to the general rules laid down—we shall, last of all, examine that of Dr. Cullen, as better adapted to views of practice, and as being also recommended by the greater simplicity of its arrangement.

This system is divided into four general classes—of *pyrexia*, or diseases of increased action; of *neuroses*, or diseases of deranged sense and motion; of *cachexia*, or diseases of depraved constitution; and of *locales*, or diseases affecting but a part.

These classes are again subdivided into their several orders and genera; and these sub-divisions are rendered more complete by synonyms explaining the connection of this with former systems, and with the most accurate histories of disease by different authors.

This system, therefore, we shall adopt, with such alterations as experience leads us to prefer; omitting entirely the synonyms, as fit only for occasional consultation, not for the present work.

CLASS I.

I. DISEASES OF INCREASED ACTION (PYREXIAE; *ex πυρ, fire, and ἔξις, habit*).

CHARACTER—Rigor of various duration; sometimes, though rarely, wanting; succeeded by quickened pulse and increased heat, interruption or disorder of several functions, general diminution of strength, particularly felt in the joints.

ORDER I. FEVERS (FEBRES).

Preceding and present debility. Pyrexia, no primary local disease.

§ 1. *Intermittents (Intermittentes)*.

Fevers, the effect of marsh contagion, characterised by their number of paroxysms never exceeding one in a day, succeeded again by strong exacerbations, and in general by shivering.

Vide vol. I. p. 195.

GENUS I. *The Tertian Intermittent (Tertiana)*.

The general intermittent character of attacking in paroxysms, with an interval of about forty-eight hours: the accessions at noon.

The tertian is modified in its appearance by several circumstances :

1. By its intermission, or apyrexia, varying.

A. From the different length of its paroxysms.

a. Not exceeding twelve hours.

b. Extending beyond twelve hours.

B. From the various returns of its paroxysms.

a. Having a daily return of equal length, and similar in their alternation.

b. Having one every second day, and two paroxysms on that day.

c. Having a return daily, with two paroxysms one day, and one only the other.

d. Having a daily paroxysm, with an intervening remission, greater between the odd and even day than *vice versa*.

C. From the different combinations of its symptoms.

a. Combined with a comatose, or drowsy, state.

b. Combined with spasmodic and convulsive appearances.

c. Combined with a cutaneous eruption or efflorescence.

D. From its connection with other diseases.

E. From some difference in its cause or origin.

2. By its showing a remission only.

II. THE QUARTAN INTERMITTENT (QUARTANA.)

The general intermittent character, with an interval of about seventy-two hours, and afternoon accessions.

The quartan, like the tertian, is modified by different circumstances.

1. By its intermission varying.

A. In its type, or period.

- a. By having simple paroxysms every fourth day, and none in the intermediate space or days.
- b. By having two paroxysms every fourth day, and none in the intermediate space or days.
- c. By having three paroxysms every fourth day, and none in the intermediate space or days.
- d. By having only, of the four days, the third free from fever, with similar paroxysms every fourth day.
- e. By having a daily attack, but the paroxysms of the fourth day only alike.

B. In its symptoms.

C. In its complication with other diseases.

2. By its remission only varying.

III. THE QUOTIDIAN INTERMITTENT (QUOTIDIANA.)

The general intermittent character, with an interval of about twenty-four hours, and morning paroxysms.

Its variety is displayed,

1. In its intermission.

A. Being solitary or simple.

- a. Universal, or recurring at the same morning hour.
- b. Partial.

B. Being complicated with other diseases.

2. In its remission only.

§ 2. *Continued Fevers (Continuæ).*

Fevers continuing, and distinguished by no intermission; arising also from a different cause than intermittents; discovering various remissions and exacerbations, though not always strongly marked; with two daily paroxysms.

IV. INFLAMMATORY FEVER (SYNOCHA.)

Great increase of heat; pulse accelerated, strong, and hard; urine high-coloured; animal functions slightly affected.

Vide vol. I. p. 3.

V. LOW FEVER (TYPHUS).

Infectious; slight increase of heat; pulse weak, small, and in general accelerated; little change of urine; great disturbance of animal functions; great prostration of strength.

The species or varieties are,

1. *The Spotted, or Petechial (Typhus Petechialis).*

a. The mild.

b. The malignant.

2. *The Jaundiced, or Yellow (Typhus Ictericus).*

Vide vol. I. p. 65, 113, 118.

VI. COMPOUND FEVER (SYNOCHUS).

Contagious; a compound of synocha and typhus, being marked at first by inflammatory symptoms, and afterwards by symptoms purely nervous.

Vide vol. I. p. 193.

Hætic Fever (Hætica).

Daily fever, with noon and evening accessions, morning remissions, rarely intermissions. In its progress, for the most part, nocturnal sweats, and the urine depositing a lateritious sediment.

ORDER II. INFLAMMATIONS.

PHLEGMASIÆ (ex φλεγμαίνω, *I burn*).

Inflammatory fever, local inflammation, or phlogosis and pain in a particular external place, with lesion of the function of some internal part: the blood, when drawn and concreted, covered with fize.

VII. LOCAL INFLAMMATION (PHLOGOSIS; ex φλοξ, φλογος, *flame*).

Pyrexia; redness of skin, swelling, heat, and pain.

Vide vol. I. p. 5; and vol. II. p. 5.

The varieties are,

1. *The Phlegmonic Species (Phlegmone),*

Or inflammation of a bright red colour, with a defined tumor, for the most part elevated to a point, often terminating in abscess, and marked with a throbbing pain.

It is distinguished by,

- a. The variety of its form.
- b. The nature of the part affected.

2. *The Rosy Species (Erythema),*

Or inflammation of a ruddy colour, vanishing on pressure; an unequal and creeping circumference, with scarce any tumor, terminating in cuticular scales, pustules, or vesicles; a sense of burning pain.

It is distinguished,

- a. By its degree of violence or intensity.
- b. By its remote cause.
- c. By its being complicated with other diseases.

Local inflammation, or phlogosis, is terminated by

1. *Imposthume (Apostema).*

When the pain, throbbing, and pulsation, have ceased, and there arises a tumor of a clear shining appearance, whitish, itching, soft, and unfixed.

2. *Gangrene (Gangræna).*

When the part grows livid, dusky, and of a leaden hue, losing sensibility, turning soft, and having frequently watery vesicles on the surface.

3. *Mortification (Spacelus).*

When the parts become entirely black and flaccid, losing all feeling and heat, attended with a foetor and quick-spreading corruption.

VIII. INFLAMMATION OF EYE (OPHTHALMIA; ex οφθαλμος, the eye.)

Redness, pain, and swelling, of the eye; impatience of light; for the most part with effusion of tears; sometimes dryness of the organ.

Vide vol. I. p. 11; vol. II. p. 179; and vol. IV. p. 157.

The various species are,

§ 1. Idiopathic.

1. *The Inflammation of the Membranes (Ophthalmia Membranarum).*

Or inflammation in the tunica adnata, and the membranes lying under it, or in the coats of the eye.

It varies,

a. In the degree of the external inflammation.

b. In the various affection of the internal coats.

2. *Inflammation of the Lids (Ophibalmia Tarsi),*

With swelling, erosion, and glutinous exudation of the tarsus palpebrarum.

§ 2. Symptomatic.

a. From disease in the eye itself.

b. From diseases of the other parts, or of the whole body.

IX. PHRENSY (PHRENITIS; ex φρενιτις, *phrensy*).

Acute pyrexia; violent head-ache; a flushing of the face, and redness of eyes; impatience of light and noise; watchfulness; impetuous delirium.

Vide vol. I. p. 9.

X. AFFECTIONS OF THROAT (CYNANCHE; ex κυνω, a dog, and αγγχω, to suffocate).

Pyrexia, sometimes of the typhoid species; redness and pain of the fauces: deglutition and respiration difficult, with a sense of stricture in the throat.

The species are,

1. *Tonsillary Sore Throat (Cynanche Tonsillaris),*

Or heat, pain, and stricture, of the mucous membrane of the fauces, particularly the tonsils, which show a tumor and redness, with synocha. *Vide vol. I. p. 13.*

2. *Malignant Sore Throat (Cynanche Maligna),*

Affection of the tonsils and mucous membrane of the fauces, with swelling, deep redness, or creeping, and with mucous crusts, of a whitish or ash colour, covering ulcers of a shining crimson colour; joined with typhous fever and eruptions. *Vide vol. I. p. 123.*

3. *Croup (Cynanche Trachealis).*

Difficult wheezing respiration, inspiration loud, voice hoarse and stridulous, slight, and hardly any apparent swelling of the fauces, swallowing little impaired, fever inflammatory. *Vide* vol. I. p. 15; vol. IV. p. 85.

4. *Pharyngeal Sore Throat (Cynanche Pharyngea),*

Redness most prevalent at the bottom of the fauces; swallowing exceedingly difficult and painful; respiration unimpaired; fever inflammatory.

5. *Parotideal Sore Throat, or Mumps (Cynanche Parotidea),*

Great external swelling of the parotid and maxillary glands; respiration and deglutition little impeded, or hardly impaired, fever inflammatory, though generally slow, and mild. *Vide* vol. IV. p. 83.

XI. PNEUMONIC INFLAMMATION (PNEUMONIA; ex πνεύμων, the lungs).

Pyrexia, very acute pain of chest, difficult respiration, cough.

The species are,

1. *Pneumonic Peripneumony (Pneumonia Peripneumonia).*

The pulse soft; dull pain in the breast, little diffused; respiration always difficult, and often impossible, except in an erect posture of the body; the face swollen and flushed, or of a purple colour; cough, in general, moist, often streaked with blood.

Vide vol. I. p. 16.

The varieties of it are,

- § 1. The simple idiopathic.
2. The idiopathic complicated with fever.
3. The symptomatic.

2. *Pleuritic Peripneumony (Peripneumonia Pleuritis).*

Pulse hard and full; pain, in general of the side, acute, particularly the right side, confined among the ribs, and increased, especially at inspiration; lying on the side troublesome; very painful cough, at first dry, afterwards humid, and often bloody.

Vide vol. I. p. 20.

Its varieties are,

§ 1. The simple idiopathic.

2. The complicated,

a. With fever.

b. With catarrh.

3. The symptomatic.

4. The false.

The pneumonic inflammation ends in

VOMICA. After pneumonic inflammation not terminating in resolution, constant difficult respiration and cough, uneasy lying on the sound side, and hectic fever.

EMPHYEMA. After pneumonic inflammation ending in suppuration, or frequently after vomica, a remission of pain, while the difficult respiration, cough, painful lying on the side, and hectic fever remain, often with a sense of a fluid in the breast, and symptoms of hydrothorax.

Vide vol. II. p. 269.

XII. INFLAMMATION OF THE HEART (CARDITIS; *ex καρδιά, the heart*).

Pyrexia, pain about or in the region of the heart, anxiety, difficult respiration, cough, unequal pulse; palpitation, fainting.

It is either,

§ 1. Idiopathic; or,

2. Symptomatic.

XIII. PERITONÆAL INFLAMMATION (PERITONITIS; ex περιτείνω, to stretch round).

Pyrexia; pain in the belly, exasperated by the erect posture, and no peculiar marked symptoms of other abdominal inflammations.

Its variations are,

1. *The Proper Peritonitis (Peritonitis Propria),*

Or affection of the membrane, as it furrounds the abdomen internally.

2. *The Omental Peritonitis (Omentalis),*

Or, as it extends over the omentum.

3. *The Mesenteric Peritonitis (Mesenterica),*

Or, as it extends over the mesentery.

XIV. INFLAMMATION OF STOMACH (GASTRITIS; ex γαστήρ, the stomach).

Typhoid pyrexia; anxiety; burning heat and pain in the epigastrium, or region of the stomach, aggravated by whatever is taken into the stomach; inclination to vomit, and the ingesta immediately rejected; hiccup.

Vide vol. I. p. 22.

Its varieties are,

§ 1. *The idiopathic.*

a. *From internal causes.*

1. *The Pblegmonic Gastritis (Pblegmonodea),*

With acute pain, and vehement pyrexia.

2. *The Erythematous Gastritis (Erythematica),*

With slight pain and fever, and with rose, or erysipelatous redness in the fauces.

§ 2. *The symptomatic.*

XV. INFLAMMATION OF INTESTINE (ENTERITIS; *ex εντερον, an intestine*).

Typhoid fever; pungent pain in the abdomen, fixed, and twisting, as it were, acutely, round the navel; vomiting, obstinate costiveness.

Vide vol. I. p. 24.

Its varieties are,

§ 1. *The idiopathic.*

1. *The Pblegmonic Enteritis (Pblegmonodea),*

Acute pain, vehement pyrexia, vomiting, and costiveness.

2. *The Erythematous Enteritis (Erythematica),*

Slight pain and fever, without vomiting, and with diarrhoea.

§ 2. *Symptomatic.*

XVI. INFLAMMATION OF LIVER (HEPATITIS; *ex ήπαρ, the liver*).

Pyrexia; tension, and acute or obtuse pain of the right hypochondrium, reaching to the clavicle and top of the right shoulder, painful and difficult lying on the left side; uneasy respiration; dry cough; vomiting, hiccup.

1. *Acute.*

To be known by the above definition,

Vide vol. I. p. 26.

2. *Chronic.*

Where no signs, its presence may be inferred from certain antecedent causes of hepatitis; from a sense of fullness and weight in the right hypochondrium; from pain, more or less acute, felt in the same part; from pain upon pressure of the right hypochondrium, or from lying on the left side; and, lastly, from slight fever, with the above symptoms.

Vide vol. I. p. 30; and vol. II. p. 129.

XVII. INFLAMMATION OF SPLEEN (SPLENITIS; ex σπλην, *the spleen*).

Pyrexia; tension, heat, swelling, and pain, in the left hypochondrium, aggravated by pressure, without any signs of nephritis.

XVIII. INFLAMMATION OF KIDNEY (NEPHRITIS; ex νεφρος, *a kidney*).

Pyrexia; pain in the region of the kidneys, often shooting along the course of the ureter, uninfluenced by motion or pressure; frequent discharge of urine, either thin and without colour, or of a bright red; vomiting; numbness of the leg; retraction or pain of testicle of the same side; not unfrequently vomiting or colic.

Vide vol. I. p. 30.

§ 1. Idiopathic Spontaneous.

2. Symptomatic.

XIX. INFLAMMATION OF BLADDER (CYSTITIS; *ex κυστις, a bag.*)

Pyrexia; swelling and pain in the hypogastrium; frequent and painful micturition, or its suppression; tenesmus.

1. From internal causes.

2. From external causes.

Vide vol. I. p. 319; and vol. II. p. 307.

XX. INFLAMMATION OF WOMB (HYSTERITIS; *ex ὑστέρα, the womb.*)

Pyrexia; heat, tension, tumor, and fixed throbbing pain in the hypogastrium; pain in the mouth of the uterus, when touched; vomiting.

Vide vol. III. p. 279.

XXI. INFLAMMATION OF JOINTS (RHEUMATISMUS; *ex ρευματίζω, to be infested with rheum.*)

Pyrexia; wandering pain of the larger joints, following the course of the muscles, or of the knees, joints, and elbows, increased by external heat, and arising from an evident and external cause.

The acute and common rheumatism is idiopathic.

It varies in its seat,

- a. In the muscles of the loins.
- b. In the muscles of the coxendix.
- c. In the muscles of the thorax.

Rheumatism is followed by

ARTHRODYNIA (ex αρθρον, a joint, and οδυνη, pain).

After acute rheumatism, a violent strain, or subluxation, succeed pains in the joints or muscles, aggravated on motion, more or less transient and alleviated by the warmth of the bed or other external heat; the joints weak, rigid, easily and often spontaneously growing cold; no pyrexia; and seldom any tumor.

Vide vol. I. p. 32.

The Lumbago and Ischias, though sometimes acute diseases, are most commonly chronic; and they in general belong to this division.

XXII. ODONTALGIA.

Rheumatism, or arthrodynia of the jaw, from caries in the teeth.

Vide vol. I. p. 211; and vol. II. p. 233.

XXIII. GOUT (PODAGRA; ex πους, the foot, and αγρα, a seizing).

Hereditary; no apparent external cause, but preceded, for the most part, by an unusual affection of the stomach; pyrexia; pain of a joint, generally of the great toe, and particularly infesting the articulations of the feet and hands: returning at intervals, and often alternating with affections of the stomach, or other internal parts.

Vide vol. I. p. 35.

The varieties of gout are,

1. *The Regular Gout (Podagra Regularis),*

Acute inflammation of the joints, of several days continuance, and gradually departing with swelling, itching, and desquamation of the part affected.

2. *The Atonic Gout (Podagra Atonica).*

Debility of the stomach, or other internal part, and either without the expected or usual inflammation of the joints, or with slight and fugacious pain in them; with dyspepsia, or other symptoms of debility, often quickly alternating.

3. *The Retrograde Gout (Podagra Retrograda),*

With inflammation of the joints suddenly disappearing, followed immediately by debility of the stomach, or of some other internal part.

4. *The Wandering Gout (Podagra aberrans),*

With inflammation of some internal part, preceded, or not preceded, by inflammation of the joints, which quickly disappears.

The gout is sometimes accompanied with other diseases.

XXIV. ARTHROPUOSIS (ex αρθρον, a joint, and πυοσις, suppuration).

Deep, obtuse, and long-continued pains of the joints, or muscular parts, often from contusion; no swelling, or a slight diffused one; no inflammation; fever, at first slight, afterwards of the hectic kind, with abscess of the part.

Vide vol. II. p. 136.

ORDER III. ERUPTIONS.

EXANTHEMATA (ex εξανθεω, I effloresce).

Contagious diseases, distinguished by their attack only once in life; commencing with fever; displaying, at a certain time, eruptions, or phlogoses, of various appearance, often numerous and small, scattered over the skin.

XXV. SMALL-POX (VARIOLA).

Contagious inflammatory fever, with vomiting and pain, excited by pressure of the epigastrium.

The eruption of small red pimples begins on the third and ends on the fifth day, which pimples, in the course of eight days, suppurate, and at last fall off in crusts, leaving often depressed scars, or little pits, in the skin.

Vide vol. I. p. 41; and vol. IV. p. 100.

The species, or varieties, are,

1. *The distinct Small-Pox (Variola discreta),*

With few pustules, and these distinct or separate, with circular margins, turgid and full; the fever ceasing upon appearance of the eruption.

2. *The confluent Small-Pox (Variola confluens),*

With numerous pustules, confluent, or intermixed with irregular margins, flaccid, with little elevation; the fever continued and increased by the eruption.

XXVI. CHICKEN-POX (VARICELLA).

Synocha; pimples breaking out after a short and slight fever, which form pustules like those of the small-pox, but seldom suppurate; ending in a few days in crusts, without leaving any scar.

Vide vol. I. p. 45; and vol. IV. p. 109.

XXVII. MEASLES (RUBEOLA).

Infectious inflammatory fever, with sneezing, defluxion of thin water from the eyes, dry and hoarse cough.

On the fourth day, or a little later, appear small clustering pimples, hardly elevated; and after three days they depart, in a small mealy or branny desquamation.

Vide vol. I. p. 47; and vol. IV. p. 106.

1. *The common Measles (Rubeola vulgaris; ex rubeo, I become red),*

With small confluent clustering pimples, hardly elevated.

It is distinguished,

- a. By the symptoms being more severe, and a less regular course.
- b. By being accompanied with cynanche.
- c. By being accompanied by a putrid habit, or diathesis.

2. *The Pocky Measles (Rubeola variolodes),*

With distinct and elevated pimples.

XXVIII. SCARLET FEVER (SCARLATINA).

Contagious inflammatory fever.

On the fourth day of the disease, the face becomes a little swelled: a florid redness, in large spots, afterwards coalescing, spreads over the skin, and in three days goes off in furfuraceous or branny scales; often succeeded by anasarca.

Vide vol. I. p. 49; and vol. IV. p. 115.

Its species are,

1. *The simple Scarlet Fever (Scarlatina simplex);*

Not accompanied with affection of throat, or cynanche.

2. *The Cynanchical Scarlet Fever (Scarlatina Cynanchica);*

With ulcerous sore throat, or cynanche.

XXIX. PLAGUE (PESTIS).

Very contagious nervous fever, marked by extreme debility.

On an uncertain day of the disease appears an eruption of buboes or carbuncles, on different parts.

Vide vol. I. p. 115.

The disease varies in degree.

XXX. ERYSIPELAS (ex ερυσίη, the rust of iron).

Inflammatory fever of two or three days; in general with drowsiness, often with delirium.

On some part of the skin, but ofteneft on the face, there is an erythematous inflammation (*phlogosis erythema*).

Vide vol. I. p. 39; and vol. IV. p. 37.

Its varieties are,

1. *The vesicular Rose (Erysipelas vesiculosum),*

With erythema, redness spreading, occupying a broad space, and terminating in some places in large blisters.

2. *The pimply Rose (Erysipelas phlyctænodes),*

With erythema from many pimples, chiefly occupying parts of the trunk of the body, and quickly terminating in pustules or small blisters.

XXXI. MILIARIA.

Synochus, anxiety, frequent sighing, unctuous sweats, and a sense of pricking, as of pin-points, in the skin.

Vide vol. III. p. 284; and vol. IV. p. 117.

On an uncertain day of the disease, break out small, red, distinct, but crowded, pimples, over the whole skin, except the face; on the top of which pimples, after a day or two, appear very small white vesicles, remaining but a short time.

XXXII. NETTLE-RASH (URTICARIA; ex *urtica*,
a nettle).

Quotidian fever.

Vide vol. IV. p. 96.

On the second day, reddish spots, resembling the stinging of nettles; vanishing almost during the day, but returning at night with fever, and in a few days totally going off in very minute scales.

XXXIII. VESICULAR FEVER (PEMPHIGUS; ex
πεμφιξ, *πεμφιγος*, a pustule).

Contagious nervous fever.

On the first, second, or third day, blisters break out in several places, of the size of a flœ or hazel-nut, which remain for several days, and then pour out a thin ichor.

XXXIV. THRUSH (APHTHA; ex *απλω*, I kindle).

Synochus.

The tongue somewhat swelled, and of a purple or livid colour, as well as the fauces; small specks, or eschars, at first appear on the fauces and margins of the tongue, and afterwards cover the whole internal surface of the mouth; they are whitish, sometimes scattered, but often coalescing; when rubbed off, quickly growing again, and remaining for an indeterminate time.

Vide vol. I. p. 125; and vol. IV. p. 39.

ORDER IV. HÆMORRHAGES.

(HÆMORRHAGIÆ; *ex αἰμορραγίῃ, I throw out blood.*)

Pyrexia, with a discharge of blood without any external cause or violence; the blood, on venesection, appearing as in the cases of inflammations, that is, the gluten with a separation of size, or a crust formed.

XXXV. BLEEDING AT THE NOSE (EPISTAXIS).

Pain, weight, or a sense of fulness, in the head; redness of the face; effusion of blood from the nose.

Vide vol. I. p. 31; vol. II. p. 214; and vol. IV. p. 167.

§ 1. *The Idiopathic.*

Varying according to the age of the patient.

a. The Epistaxis of Youth (Epistaxis Juniorum),

With signs of arterial plethora.

b. The Epistaxis of Age (Epistaxis Senum),

With signs of venous plethora.

§ 2. *The Symptomatic.*

a. From internal causes.

b. From external causes.

XXXVI. SPITTING OF BLOOD (HÆMOPTYSIS;
ex αἷμα, blood, and πτύω, to spit.)

Redness of the cheeks; sense of uneasiness, pain, or heat, in the chest; difficult respiration; irritation of the fauces; blood of a florid colour and saltish taste, often frothy, brought up by coughing, or hawking.

Vol. I. p. 52.

§ 1. *The Idiopathic.*1. *The Plethoric Species (Hæmoptysis Plethorica),*

Appearing without any external cause, previous cough, or suppression of any customary evacuation.

2. *The Species from Violence (Hæmoptysis Violenta),*

Occurring on the application of external violence or injury.

3. *The Phthisical Species (Hæmoptysis Phthisica),*

Commencing after long-continued cough, with wasting and debility.

4. *The Calculous Species (Hæmoptysis Calculosa);*

With spitting up of small calculous particles, often of a calcareous nature.

5. *The Vicarious Species (Hæmoptysis Vicaria),*

Occurring after the suppression of some accustomed evacuation.

§ 2. *The Symptomatic.*

The consequence of hæmoptysis is for the most part

Consumption (Phthisis),

Emaciation, or wasting debility; cough; hectic fever; and, in general, purulent expectoration.

Vide vol. I. p. 25.

The species and varieties of consumption are,

1. *The Incipient Consumption (Phtisis Incipiens),*

Attended with no expectoration of pus.

2. *The Confirmed Consumption (Phtisis Confirmata),*

Marked by an expectoration of pus.

Both kinds are varied,

a. In respect to their remote cause.

b. In respect to the source of the matter or pus.

XXXVII. PILES (HÆMORRHOIS; ex αἷμα, blood, and ῥέω, to flow).

Sense of weight or pain in the head; vertigo; pain in the loins, and heat and fullness about the anus; round the anus livid painful tubercles, discharging for the most part blood; which likewise sometimes, without any apparent tumor, flows from within the anus.

Vide vol. I. p. 54; vol. II. p. 324.

The varieties of this disease are,

1. *The Tumid Piles (Hæmorrhoids Tumens),*

From external swellings, with

a. Bloody discharge.

b. Mucous discharge.

2. *The Falling-down, or Procidental Piles (Hæmorrhoids Procidens),*

From protrusion of the anus.

3. *The Flowing Piles (Hæmorrhoids Fluens).*

Internal, with no external tumor, or protrusion of the anus.

4. *The Blind Piles (Hæmorrhoids Cæca),*

With pain and tumor of the anus, and no effusion of blood.

XXXVIII. EXCESS OF MENSES (MENORRHAGIA; *ex μην, a month, and ραγας, a rupture*).

Pains in the back, loins, and belly, bearing down, or like those of child-birth; the menses exceeding the monthly flow in quantity, frequency, or duration.

Vide vol. I. p. 56; vol. III. pp. 34, 73, and 267.

The varieties are,

1. *The Excess of Bloody Discharge (Menorrhagia Rubra),*
In women not pregnant, nor in child-bed. Or,
2. *The Abortive or Bloody Discharge (Menorrhagia Abortus),*
Of pregnant women.
3. *The Lochial or Bloody Discharge (Menorrhagia Lochialis),*
Of women in child-bed.
4. *The Bloody Partial Discharge (Menorrhagia Vitiorum),*
From organic lesion, or local disease.
5. *The Whites (Menorrhagia Alba).*
Serous, without local affection, in women not pregnant.
6. *The Whites (Menorrhagia Nabothi).*
Discharge serous in pregnant women.

The following discharges are for the most part, if not always, symptomatic.

The *Stomace*, or bloody discharge from the gum.

The *Hæmatemesis*, or blood from the stomach, which is in general vicarious of an accustomed hæmorrhage, or symptomatic of local disease of the stomach, or of what is called the morbus niger, or lastly of external violence.

The *Hæmaturia*, or discharge of blood from the kidneys, is generally symptomatic of calculus in the kidneys, and sometimes of putrid fevers.

The *Cystirrhagia*, or discharge of blood from the bladder, which is in general symptomatic of calculus in the bladder, more rarely of other disease there.

ORDER V. INCREASED WHITE DISCHARGES
(PROFLUVIA).

Pyrexia, increased morbid excretion, without blood, as a primary part.

XXXIX. CATARRH (CATARRHUS; ex καταρρεω,
to flow down).

Pyrexia often contagious; morbid and increased excretion of mucus, from the glands of the membrane of the nose, fauces, or bronchia; or tendency to such increased morbid excretion.

Vide vol. I. p. 59.

Its varieties are,

1. Catarrh from cold.
2. Catarrh from contagion.

XL. DYSENTERY (DYSENTERIA; ex δυσ, bad, στερεον, an intestine; and ρεω, to flow.

Contagious pyrexia; frequent mucous or bloody stools, the fæces being for the most part retained; gripes; constant urgent desire.

Vide vol. I. p. 61.

Its varieties depend,

- a.* On its being accompanied with worms.
- b.* On the dejection of small masses of a fleshy or sebaceous matter.
- c.* On being accompanied with an intermittent fever.
- d.* On being without blood.
- e.* On being accompanied with miliary fever.

CLASS II.

NEUROSES.

Morbid state of sense and motion, without primary pyrexia, or without local affection.

ORDER I. COMATA.

The voluntary motions impaired, with sleep, or a suspension of sense.

XLI. APOPLEXY (APOPLEXIA; ex αποπλησσω, to strike down suddenly).

Vide vol. I. pp. 69 and 168.

The whole of the voluntary motions in some degree abolished, with sleep, more or less profound, the action of the heart and arteries continuing.

The species of idiopathic apoplexy are,

1. Apoplexia *sanguinea*, with signs of universal plethora, and chiefly of the head.
2. Apoplexia *serosa*, occurring for the most part in the leucophlegmatic bodies of old men.
3. Apoplexia *hydrocephalica*, coming on by degrees; affecting infants and children, first with lassitude, a degree of fever and headach; afterwards with slow pulse, dilatation of the pupil, and drowsiness.
4. Apoplexia *atrabilaria*, in a person of a melancholic temperament.

CLASSIFICATION.

5. Apoplexia *traumatica*, from external violence applied to the head.
6. Apoplexia *venenata*, from sedatives internally or externally administered.
7. Apoplexia *mentalis*, from affections of the mind.
8. Apoplexia *cataleptica*, the muscles obeying the motion of the joints, when influenced by force externally applied.
9. Apoplexia *suffocata*, from suffocation by something external.

Apoplexia is frequently symptomatic

a. Of intermittent fever.

b. Of continued fever.

c. Of phlegmasia.

d. Of exanthema.

e. Of hysteria.

f. Of epilepsy.

g. Of gout.

h. Of worms.

i. Of suppression of urine.

k. Of scurvy.

XLII. PARALYSIS (ex παραλυσις, a palsy).

Some only of the voluntary motions impaired, often with sleep.

Vide vol. I. p. 71.

§ 1. Idiopathic.

1. Paralysis *partialis*, of some only of the muscles.

2. Paralyfis *hemiplegica*, of one side of the body.

It varies in regard to the habit of body.

- a.* Hemiplegia in a plethoric habit.
 - b.* Hemiplegia in a leucophlegmatic habit.
3. Paralyfis *paraplegica*, of one half of the body taken transversely.
 4. Paralyfis *venenata*, from sedatives, applied either internally or externally.

§ 2. *Symptomatic.*

Tremor, as being always symptomatic, I cannot admit into the number of genera; but the species enumerated by Sauvages, according as they seem to me to be symptoms either of asthenia or paralyfis, I shall subjoin.

TREMOR; alternate and frequent motion of a joint to and fro.

1. Asthenic species.
2. Paralytic species.
3. Convulsive species.

ORDER II. ADYNAMIÆ.

The involuntary motions, whether vital or natural, impaired.

XLIII. FAINTING (SYNCOPE; *ex συνκοπή, to fall down*).

Action of the heart diminished, or for a time suspended

§ 1. *Idiopathic.*

1. Syncope *cardiaca*, often returning without apparent cause, with vehement palpitation of the heart at intervals : *From affection of the heart or neighbouring vessels.*
2. Syncope *occasionalis*, originating from an evident cause : *From affection of the whole system.*

§ 2. *Symptomatic*

Of diseases, either of the whole system, or of other parts, except the heart.

XLIV. DYSPEPSIA (ex *δυσ*, *bad*, and *πενω*, *to conduct*).

Loss of appetite, nausea, vomiting, flatulence, eructation, rumination, heartburn, pain in the stomach, at least some or more of these at once occurring, generally with costiveness, and without any other disease either of the stomach or other parts.

Vide vol. I. p. 94.

§ 1. *Idiopathic.*§ 2. *Symptomatic.*

1. From disease of the stomach itself.
2. From disease of other parts, or of the whole body.

XLV. HYPOCHONDRIASIS (ex *ὑπο*, *under*, and *χονδρία*, *a cartilage*).

Dyspepsia, with languor and dejection of mind; a sense of fear, arising from inadequate causes, confined to persons of a melancholic temperament.

Vide vol. I. p. 100.

There is but one idiopathic species.

XLVI. CHLORORIS (ex *χλωρίζω*, to look green).

Dyspepsia, or desire to eat things unalimentary; paleness or discoloration of the skin; defect of blood in the veins, with cedematous swelling of the body; debility; palpitation; retention of the menses.

Vide vol. I. p. 102.

ORDER III. SPASMI (ex *σπασμος*, the cramp).

Irregular motions of the muscles, or muscular fibres.

§ 1. *In the Animal Functions.*XLVII. TETANY (TETANUS; ex *τείνω*, to stretch).

Spasmodic rigidity of several muscles.

Vide vol. I. p. 75.

It varies,

- a. In degree, as in the half or whole of the body being affected with spasms.
- b. In respect of its remote causes, as it arises either from an internal cause, from cold, or from a wound.
- c. In respect of the part of the body affected.

XLVIII. LOCK JAW (TRISMUS; ex *trismus*, a grating noise).

Spastic rigidity, chiefly of the lower jaw.

Vide vol. I. p. 75.

1. *The Lock Jaw of Infancy (Trismus Nascentium),*

Attacking infants during the two first weeks from their birth.

Vide vol. I. p. 77; and vol. IV. p. 44.

2. *The Lock Jaw from a Wound (Trismus Traumaticus),*

Attacking persons of all ages, and arising from cold or a wound.

Vide vol. II. p. 27.

XLIX. CONVULSION (CONVULSIO; *ex convolto, to pull together*).

Irregular and unnatural contraction of the muscles, without sleep.

Vide vol. IV. p. 43 and 59.

§ 1. The idiopathic.

2. The symptomatic.

L. CHOREA (*ex χορεία, a dance*).

Attacking young persons of both sexes, in general from ten to fourteen years of age, with convulsive motions partly voluntary, for the most part of one side, the motion of the arms and hands resembling the gesticulation of mountebanks; in walking, one foot is rather dragged than lifted.

Vide vol. I. p. 78.

LI. RAPHANIA (*ex ραφανός, a radish*).

Spasmodic contraction of the joints, with convulsive motions, very violent pain, periodical.

LII. EPILEPSIA (*ex epilepsis, a swoon*).

Convulsion of the muscles, with sleep.

Vide vol. I. p. 72.

¶ 1. *The Idiopathic.*

1. *Epilepsia cerebialis*, suddenly coming on without manifest cause ; not preceded by any troublesome sensation, unless perhaps of vertigo or dimness of sight.
2. The sympathetic Epilepsy (*Epilepsia Sympathica*), without manifest cause ; but preceded by the sensation of a certain aura rising from some part of the body to the head.
3. The occasional Epilepsy (*Epilepsia occasionalis*), arising from manifest irritation, and ceasing when the irritation is removed.

This varies from the diversity of the irritating cause ;
as,

- a. From injury done to the head.
- b. From pain.
- c. From worms.
- d. From poison.
- e. From cutaneous eruptions, or other effusion of acrid humours, repelled.
- f. From crudity in the stomach.
- g. From affection of mind.
- h. From excess of hæmorrhage.
- i. From debility.

¶ 2. *The Symptomatic.*

§ 2. *In the Vital Functions.*

In the action of the heart.

LIII. PALPITATIO.

Violent and irregular motion of the heart.

¶ 1. *The Idiopathic.*

¶ 2. *The Symptomatic.*

In the action of the lungs.

LIV. ASTHMA (ex ἀσθμαζω, to breathe with difficulty).

Difficult respiration recurring at intervals, with a sense of stricture or tightness in the breast; wheezing respiration; difficult cough at the beginning of the fit, sometimes none, free towards the end; and often with copious spitting of mucus.

Vide vol. I. p. 79.

¶ 1. *The Idiopathic.*

1. The spontaneous Asthma (*Asthma spontaneum*), without manifest cause, or being accompanied with any other disease.
2. The exanthematic Asthma (*Asthma exanthematicum*), from an eruption or acrid effusion repelled.
3. The plethoric Asthma (*Asthma plethoricum*), from suppression of any usual evacuation of blood, or from spontaneous plethora or fulness.

¶ 2. *The Symptomatic.*

LV. DYSPNŒA (ex δύς, bad, and πνέω, to breathe).

Continual difficult respiration, with fulness and obstruction of breast, not with sense of stricture. Cough frequent through the whole course of the disease.

¶ 1. *Idiopathic.*

1. The catarrhal Dyspnœa (*Catarrhalis*), with frequent cough, bringing up a copious viscid mucus.
2. The dry Dyspnœa (*Sicca*), with cough for the most part dry.

3. Dyspnœa from state of atmosphere (*aërea*), increased by every the least change in the weather.
4. Dyspnœa from earthy matter (*terrea*), the cough bringing up an earthy or calculous substance.
5. The watery Dyspnœa (*aquosa*); the urine in small quantity, swelling of the feet, without fluctuation in the breast, or other characteristic signs of water in the chest.
6. The Dyspnœa from fat (*pinguedinosæ*), in very fat persons.
7. The thoracic Dyspnœa (*thoracica*), from the parts inclosing the thorax being hurt or ill formed.
8. The external Dyspnœa (*extrinseca*), from manifest external causes.

¶ 2. The Symptomatic.

1. Of diseases of the heart, or larger vessels.
2. Of abdominal tumor.
3. Of various diseases.

LVI. CHINCOUGH (PERTUSSIS).

Contagious; convulsive, suffocating cough, with a loud noise, called *whooping*, at each inspiration; often with vomiting.

Vide vol. I. p. 81; vol. IV. p. 89.

§ 3. In the Natural Functions.

LVII. PYROSIS (ex πυρσος, a burning).

Burning heat in the epigastrium, with copious eructations of an aqueous humour, for the most part insipid, but sometimes acrid.

Vide vol. I. p. 82.

¶ 1. The idiopathic.

2. The symptomatic.

LVIII. COLIC (COLICA; ex *colon*, the gut of that name).

Pain in the lower belly, chiefly with a sense of twisting or wringing round the navel; vomiting; costiveness.

Vide vol. I. pp. 84, 87; and vol. IV. p. 46.

¶ 1. *The Idiopathic.*

1. The spasmodic Colic (*Colica Spasmodica*), with refraction of the navel and spasms of the abdominal muscles.

It is varied by the symptoms attending it.

- a.* With vomiting of stercoraceous matter, or of things injected by the anus.
- b.* With inflammation.

2. The Devonshire, or Poitou, Colic (*Colica Piſtonum*); preceded by a sense of weight or uneasiness in the lower belly, chiefly round the navel; followed by colic pain, at first slight, not continual, and generally increased after meat; at length more severe and almost perpetual; with pain of the arms and back, ending at last in palsy.

It is varied; the difference in its remote cause.

- a.* Being the effect of metallic poison.
- b.* Of acids in the intestines.
- c.* From cold.
- d.* Of contusion of the back.

3. The stercoraceous Colic (*Colica stercoracea*), in persons subject to costiveness, after long continued constipation.

4. The accidental Colic (*Colica accidentalis*), from acrid matter in the intestines.
5. The meconial Colic (*Colica meconialis*), in new-born children, from retention of the meconium.
6. The Colic from Callus (*Colica callosa*), with a sense of constriction in some part of the intestines, and often previously of collected flatus, with some pain, which flatus gradually goes off; the belly is costive, and at last the fæces are discharged only in a liquid state, and in small quantity.
7. The Colic from calculus (*Colica calculosa*), with a fixed hardness in a particular part of the abdomen; calculi ejected by the anus.

¶ 2. *The Symptomatic.*

LIX. CHOLERA (ex χολη, bile, and ρεω, to flow).

Evacuation of bilious matter in both directions; anxiety; gripes; spasms of the legs.

Vide vol. I. p. 83.

¶ 1. *The Idiopathic.*

1. The spontaneous Cholera (*spontanea*), occurring in warm weather, without manifest cause.
2. The accidental Cholera (*accidentalis*), from acrid matters in the stomach or intestines.

¶ 2. *The Symptomatic.*

LX. LOOSENESS (DIARRHŒA; ex διαρρῆω, I flow through).

Frequent purging; the disease not contagious; no primary fever.

Vide vol. I. p. 89; and vol. IV. p. 51.

¶ 1. *The Idiopathic.*

1. From excess or dilatation (*Diarrhœa crapulosa*); the fæces discharged in a more liquid state than is natural, and in greater quantity.
2. The bilious *Diarrhœa (biliosa)*; a great quantity of yellow fæces discharged.
3. The mucous *Diarrhœa (mucosa)*; copious discharge of mucus, the consequence of acrid matters taken in, or of cold, especially applied to the feet.
4. The cœliac *Diarrhœa (Diarrhœa cœliaca)*, with discharge of a milky fluid, like chyle.
5. The lenteric Looseness (*Diarrhœa lenteria*), with the food quickly discharged without any material change.
6. The hepatic Looseness (*Diarrhœa hepatorrhœa*), with discharge of a bloody matter like serum, without pain

¶ 2. *The Symptomatic.*

LXI. MORBID FLOW OF URINE (DIABETES; ex δια, through, and βαινω, to pass).

An immoderate chronic discharge of urine, in general unlike the natural.

Vide vol. I. p. 92.

¶ 1. *The Idiopathic.*

1. *The honey-like Diabetes (mellitus)*, with urine of the smell, colour, and taste, of honey.
2. *The insipid Diabetes (insipidus)*, with limpid urine not sweet.

¶ 2. *The Symptomatic.*

LXII. HYSTERIA; (ex ὑστέρα, the womb).

Rumbling noise of the bowels; the feeling of a ball rolling itself in the abdomen, rising towards the stomach and gullet, and there giving a sense of strangulation; sleep; convulsions; copious discharge of limpid urine; the mind involuntarily, various, and unsteady.

Vide vol. I. p. 97.

It varies according to the remote cause; as,

- a.* From retardation of the menses.
- b.* From excessive discharge of the menses, bloody.
- c.* From excessive discharge of the menses, serous, or fluor albus.
- d.* From visceral obstruction.
- e.* From disease of the stomach.
- f.* From excessive lust.

LXIII. HYDROPHOBIA (ex ὑδωρ, water, and φωβέω, I dread).

Loathing and horror of liquids, as exciting painful convulsion of the pharynx, generally proceeding from the bite of a mad animal.

Vide vol. I. p. 110.

1. The furious or rabid Hydrophobia (*rabiosa*), with desire of biting, from the bite of a rabid animal.
2. The simple Hydrophobia (*simplex*), without rage, or inclination to bite.

ORDER IV. VESANIÆ (ex *Vesania*, *Madness*).

Impaired judgment, no fever or coma.

LXIV. WANT OF MIND (AMENTIA; ex *a*, from, and *mens*, the mind).

Weakness of judgment, incapable of perceiving or remembering the relations of things.

1. The congenite Amentia (*congenita*), continuing from birth.
2. The Amentia of age (*senilis*), from decay of perception and memory in old age.
3. The acquired Amentia (*acquisita*), induced by evident external causes in men of sound judgment.

LXV. MELANCHOLIA (ex *μελας*, *black*, and *χολη*, *bile*).

Vide vol. I. p. 105.

Partial insanity, no dyspepsia.

Varied according to the different subjects inducing it; as,

- a.* From false perception of the state of the patient's health, conceived to be dangerous from slight causes; or from despondence with regard to the state of his affairs.
- b.* From false perception of the prosperous state of the patient's affairs.
- c.* From vehement love, but without satyriasis or nymphomania.
- d.* From superstitious fear of the future.
- e.* From aversion to motion and all the offices of life.

f. From inquietude and impatience in every situation.

g. From weariness of life.

b. From false conception of the nature of the person's species.

LXVI. MADNESS (MANIA).

Universal insanity.

Vide vol. I. p. 105.

1. The mental Mania (*mentalis*), arising from affection of the mind.

2. The corporeal Mania (*corporea*), arising from evident corporeal derangement.

Which varies also according to the diversity of the disease.

3. The obscure Mania (*obscura*), preceded by no passion of the mind, or evident bodily derangement.

The symptomatic species of Mania are,

The Paraphrosyne of Sauvages and Sagar.

a. From poisons.

b. From passion.

c. From fever.

LXVII. ONEIRODYNIA (ex *ονειρος*, a dream, and *οδυνη*, anxiety).

Inflamed or disturbed imagination during sleep.

1. The active Oneirodynia (*activa*), inciting persons to walking and to various motions.

2. The oppressive Oneirodynia (*gravans*), with a sense of incumbent weight generally oppressing the breast.

CLASS III.

CACHEXIÆ.

Depraved state of the whole, or a considerable part, of the body; without fever or nervous affection; constituting a primary part of the disease.

ORDER I. WASTINGS (MARCORES).

Emaciation of the whole body.

LXVIII. CONSUMPTION (TABES).

Emaciation, loss of strength, hectic fever.

1. The purulent Consumption (*Tabes purulenta*), proceeding from ulcer either external or internal, or from abscess of the lungs, and varying according to its particular seat.
2. The scrofulous Consumption (*Tabes scrofulosa*), in scrofulous subjects.
3. The poisoned Consumption, (*Tabes venenata*), proceeding from poison.

LXIX. ATROPHY (ATROPHIA; ex α, priv. and

τροφή, nutrition).

Emaciation, loss of strength, no hectic fever.

1. The Atrophy from fluid profusion (*Atrophia inanitorum*), or from excessive evacuation.
2. The Atrophy from starvation (*Atrophia famelicorum*), or defect of nourishment.
3. The Atrophy from bad habit (*Atrophia eacochymica*), or corrupted food.
4. The Atrophy from weakness (*Atrophia debiliūm*), or from a depraved state of the function of nutrition, without previous or excessive evacuation, or depraved state of the humours.

ORDER II. INTUMESCENTIÆ.

External swelling of the whole, or of a considerable part, of the body.

§ 1. ADIPOUS (*ADIPOSÆ*).

LXX. EXCESS OF CORPULENCE (*POLYSARCIA*; ex πολυς, *much*, and σαρξ, *flesh*).

Troublesome swelling, depending on the increase of oil in the cellular texture of the body.

§ 2. FLATULENT (*FLATUOSÆ*).

LXXI. PNEUMATOSIS (ex πνευματω, *to fill with wind*.)

Swelling of the body, distended, elastic, and crackling on the touch.

1. The spontaneous Pneumatosis (*spontanea*), arising without evident cause.

2. *Pneumatosis traumatica*, or from a wound in the thorax.
3. *Pneumatosis venenata*, or from poison internally or externally applied.
4. *Pneumatosis hysterica*, or combined with hysteria.

LXXII. TYMPANY (TYMPANITES; *ex τυμπανίζω, to sound like a drum*).

Vide vol. I. p. 219.

Swelling of the abdomen, tense, elastic, and sounding on being struck; costiveness; emaciation of the other parts.

1. The intestinal Tympany (*Tympanites intestinalis*), generally with unequal tumour of the abdomen, with frequent discharge of wind, which gives relief to the pain and tension.
2. The abdominal Tympany (*Tympanites abdominalis*), more sensibly resounding on the touch, the tumour more equal, the emission of wind less frequent, and giving less relief than in the former species.

LXXIII. PHYSOMETRA (*ex φυσίω, to inflate, and μήτρα, the womb*).

Slight elastic tumour in the hypogastrium, resembling in figure and seat the womb.

§ 3. DROPSIES, or *AQUOSÆ*.

LXXIV. ANASARCA (*ex ανα, along, and σαξ, flesh*).

Soft unelastic swelling of the whole, or part, of the body.

Vide vol. I. p. 167.

1. *Anasarca serosa*, proceeding from a retention of serum on the suppression or some accustomed evacuation; or from an increase of serum produced by an unusual quantity of water taken into the body.

2. *Anasarca oppilata*, from compression of the veins.
3. *Anasarca exanthematica*, succeeding eruptions, particularly erysipelas.
4. *Anasarca anaemia*, from tenuity of blood, produced by hæmorrhage.
5. *Anasarca debiliūm*, in persons exhausted by long disease, or other causes.

The *Anasarca purulenta* can hardly be referred to this genus.

LXXV. HYDROCEPHALUS (ex ὕδωρ, *water*, and κεφαλή, *the head*).

Soft unelastic swelling of the head, the futures of the scull opening.

Vide vol. I. p. 168; and vol. IV. p. 134.

LXXVI. HYDRORACHITIS (ex ὕδωρ, *water*, and ραχίς, *the spine*).

Soft small swelling above the vertebræ of the loins, with their separation.

Vide vol. II. p. 159.

LXXVII. HYDROTHORAX (ex ὕδωρ, *water*, and θώραξ, *the chest*).

Difficulty of breathing; paleness of the face; œdematous swellings of the lower extremities; scarcity of urine; difficult lying in a decumbent posture; sudden and spontaneous starting out of sleep, with palpitation of the heart; water in the chest fluctuating.

Vide vol. I. p. 171.

LXXVIII. ASCITES (ex ασκος, a sac).

Swelling of the abdomen; tense; hardly elastic; with fluctuation.

Vide vol. I. p. 173.

1. The abdominal Ascites (*Ascites abdominalis*); with equal diffused tumour of the whole abdomen, and with sensible fluctuation.

It is varied by its cause; as,

- a. From visceral obstruction.
 - b. From debility.
 - c. From tenuity of the blood.
 - d. From the nature of the liquid effused.
2. The enclosed or circumscribed Ascites (*Ascites sacculus*), with partial swelling of the abdomen, at least at the beginning, and with difficulty detected.

LXXIX. HYDROMETRA (ex υδωρ, water, and μητρα, the womb).

Vide vol. II. p. 274.

A swelling of the hypogastrium in women, gradually increasing, resuming the shape of the uterus; yielding to the pressure, and fluctuating; not depending either on suppression of urine or pregnancy.

LXXX. HYDROCELE (ex υδωρ, water, and κηλη, a swelling).

Vide vol. II. p. 275.

Tumour of the scrotum without pain, gradual in its increase, soft, fluctuating, pellucid.

§ 4. *SOLID (SOLIDÆ).*LXXXI. *PHYSCONIÆ* (ex φυσκω, to be big-bellied).

Partial abdominal tumor, without fluctuation, and giving no sound when struck.

Its varieties are,

1. The hepatic *Physconia* (*hepatica*).
2. The splenic *Physconia* (*splenica*).
3. The renal *Physconia* (*renalis*).
4. The uterine *Physconia* (*uterina*).
5. The ovarian *Physconia* (*ab ovario*).
6. The mesenteric *Physconia* (*mesenterica*).
7. The intestinal *Physconia* (*intestinalis*).
8. The omental *Physconia* (*omentalis*).
9. The mixed *Physconia* (*polysplachna*).
10. The visceral *Physconia* (*visceralis*).
11. The external lupial *Physconia* (*externa lupialis*).
12. The external schirroid *Physconia* (*externa schirrodea*).
13. The external hydatidous *Physconia* (*externa hydatidosa*).
14. The subcutaneous fatty *Physconia* (*ab adipe subcutaneo*).
15. The excrescential *Physconia* (*ab excrescentia*).

LXXXII. RICKETS (RACHITIS; *ex paxiis, the back-bone*).

Head large, particular prominence of forehead, joints thick and swelled, ribs depressed, abdomen protuberant, emaciation of several other parts.

Vide vol. I. p. 187; and vol. IV. p. 151.

It varies, as being either

- a. Simple, and uncombined with any other disease.
- b. Or combined with other diseases.

ORDER III. IMPETIGINES,

(*ex in, and petigo, a scab*).

Morbid affections of the skin, or external parts of the body, the consequence of a depraved habit.

LXXXIII. KING'S EVIL (SCROFULA; *ex scrofula, a pig*).

Vide vol. I. p. 184; and vol. IV. p. 132.

Tumors of the conglobate glands, indolent and hard, especially in the neck, with little or no pain; a peculiar look or looseness of the eye; the upper lip and fleshy part of the nose tumid; the face florid; the skin soft; the abdomen large.

1. The common Scrofula (*vulgaris*), simple, external, enduring.
2. The mesenteric Scrofula (*mesenterica*), simple, internal, with paleness of the face, want of appetite, tumor of the abdomen, and unusual fœtor of the fæces.
3. The transient Scrofula (*fugax*), very simple, and only round the neck, generally occurring on resorption from ulcers on the head.
4. The American Scrofula (*Americana*), joined with the jaws.

LXXXIV. VENEREAL DISEASE (SYPHILIS).

Primary affections of the genitals of a contagious nature, the effect of impure venery, succeeded by ulcers of the tonsils and clustered pimples on the skin, chiefly at the margin of the hair, going off in crusts or scabby ulcers; also by pains in the bones, and protuberances of some parts of them.

Vide vol. I. p. 125; and vol. IV. p. 121.

LXXXV. SCURVY (SCORBUTUS).

Scurvy is an unusual weakened state of body, marked by bleeding of the gums, spots of different colours on the skin, for the most part livid, particularly at the roots of the hairs.

In cold countries, and following, for the most part, the use of a putrescent diet or salted animal food, with deficiency of recent vegetable matter.

It varies in its degree and in its symptoms.

Vide vol. I. p. 176.

LXXXVI. ELEPHANTIASIS (ex *elephas*, an *elephant*).

Contagious; skin thick, wrinkled, rough, unctuous, divested of hair; loss of feeling in the extreme joints; face deformed with tubercles; the voice hoarse and nasal.

Vide vol. I. p. 191.

LXXXVII. LEPROSY (LEPRA, ex *lepis*, a *scale*).

The skin rough, with whitish, scaly, wrinkled scabs or ulcers, sometimes humid below, with itchiness.

LXXXVIII. FRAMBOESIA (ex *framboise*, a *raspberry*).

Swellings growing from various parts of the skin, the effect of ulceration, and resembling the fruit of the raspberry.

Vide vol. I. p. 161.

LXXXIX. TRICHOMA (ex τριχος, to comb the hair.)

Contagious; the hair unusually coarse, thick, and twisted or matted together into inextricable knots or tufts.

XC. JAUNDICE (ICTERUS).

Yellowness of the eyes and skin, occasionally changing to a brown or black colour; fæces whitish; the urine obscurely red, tinging things dipped into it of a yellowish colour, and the same conspicuous in the other excretions.

Vide vol. I. p. 179; and vol. IV. p. 36.

¶ 1. *Idiopathic.*

1. The calculous Jaundice (*Icterus Calculosus*), with acute pain in the epigastric region, increased after meat, and with discharge of biliary concretions by stool.
2. The spasmodic Jaundice (*Icterus spasmodicus*), without pain, after spasmodic diseases, or affections of the mind.
3. The hepatic Jaundice (*Icterus hepaticus*), without pain, after diseases of the liver.
4. The pregnant Jaundice (*Icterus gravidarum*), occurring during pregnancy, and disappearing after delivery.
5. The infantile Jaundice (*Icterus infantum*), occurring in infants a few days after birth.

¶ 2. *Symptomatic.*

The febrile Jaundice (*Aurigo febrilis*).

The Indian Jaundice (*Aurigo Indica*), being the natural colour, which cannot be considered as a disease.

CLASS IV.

LOCALES.

The primary affection of a part, not of the whole body.

ORDER I. DYSÆSTHESIÆ,

(ex *δυσ*, *bad*, and *αἰσθησις*, *feeling*).

Derangement of the external organ, producing depravation or loss of some sense.

XCI. CALIGO; *vulgò*, CATARACT.

Dimness or loss of sight, from the interposition of an opaque film between the object and the retina; fixed either in the eye itself or in the eyelids.

Vide vol. II. p. 190.

1. The Dimness of the Lens (*Caligo lentis*), from an opaque spot behind the pupil.
2. The Dimness of the Cornea (*Caligo corneæ*), from opacity of the cornea.

Varying according to the disease which produces the opacity.

3. The Dimness of the Pupil (*Caligo pupillæ*), from obstruction of the pupil.

4. The Dimness of the Humours (*Caligo humorum*), from disease or defect of the aqueous humour.

Varying according to the different state of the humour.

5. The Dimness of the Lids (*Caligo palpebrarum*), from disease of the eyelids.

Varying according to the disease.

XCII. AMAUROSIS (*ex αμαυρωσις, obscurity; vulgè, GUTTA SERENA*).

Dimness or loss of sight, without apparent disease in the eye; the pupil for the most part dilated and immoveable.

Vide vol. I. p. 218.

1. The Loss of Sight depending on Compression (*Amaurosis compressionis*), after the causes and with signs of congestion in the brain; and

Varying according to the remote cause.

2. The atonic Loss of Sight (*Amaurosis atonica*), after the causes, with signs of debility.
3. The spasmodic Loss of Sight (*Amaurosis spasmodica*), after the causes, and with signs of spasm.
4. The Loss of Sight (*Amaurosis venenata*), from poison, internal or external.

XCIII. DEPRAVED VISION (*DYSOPIA; ex δυσ, bad, and οψις, vision*).

Depraved vision, that objects are distinctly seen, only in a certain light, at a certain distance, or in a certain position.

1. The species from Darkness (*Dysopia tenebrarum*), or objects not visible except in a strong light.
2. The species from Excess of Light (*Dysopia luminis*), or objects not visible except in an obscure light.

3. The species where the person is termed Near-sighted (*Dysopia diffitorum*), objects not seen at a great distance.
4. The species where the person is termed Far-sighted (*Dysopia proximorum*), or very near objects not seen.
5. The lateral species (*Dysopia lateralis*), or objects not visible, except in an oblique position.

XCIV. DEPRAVED VISION (PSEUDOBLEPSIS; ex *ψευδο*, false, and *βλεψις*, sight).

False vision, so that a person thinks he sees objects which do not exist, or sees things that do exist differently from what they really are.

1. The imaginary Pseudoblepsis (*imaginaria*), or where objects appear which in reality do not exist.

Varying according to the thing seen.

2. The changing Pseudoblepsis (*mutans*), or where existing objects appear in some degree changed.

Varying according to the particular change of the objects, and also according to the remote cause.

XCV. DEAFNESS (DYSECOEA; ex *δυσ*, bad, and *ακουω*, to hear).

Vide vol. I. p. 218.

Hearing impaired or lost.

1. The organic Deafness (*Dysecoea organica*), from fault of the organs which transmit sounds to the internal ear.

Also varying according to the fault and part effected.

2. The atonic Deafness (*Dysecoea atonica*), without apparent defect in the organs transmitting sounds.

Varying according to the cause.

XCVI. DEPRAVATION OF HEARING (PARACUSIS ; ex *παρά*, wrong, and *ακουω*, to hear).

False hearing.

1. The imperfect Paracusis (*imperfecta*), where external sounds are perceived, but not accurately, or with the usual conditions.

Varying,

- a. With dull hearing.
 - b. With too exquisite hearing.
 - c. With one external sound, doubled from internal causes.
 - d. With sounds which a person wishes to hear, not heard unless another sound be at the same time raised.
2. The imaginary Paracusis (*imaginaria*), where sounds not existing without are excited by internal causes.

Varying according to the sound perceived ; and also according to the remote cause.

XCVII. DEFECT OF SMELLING (ANOSMIA ; ex *α neg.* and *οσμη*, smell).

Smelling impaired or lost.

1. The organic Anosmia (*organica*), from a fault of the membrane investing the nostrils ; and

Varying according to this fault.

2. The atonic Anosmia (*atonica*), without any evident fault of the membrane investing the nostrils.

XCVIII. DEFECT OF TASTING (AGHEUSTIA;
ex α neg. and γενομαι, to taste),

The taste impaired or lost.

1. The organic Agheustia (*organica*), from fault in the membrane of the tongue preventing the application of sapid bodies to the nerves.
2. The atonic Agheustia (*atonica*), without any evident fault of the tongue.

XCIX. DEFECT OF FEELING (ANÆSTHESIA).

The sense of touch impaired or lost.

ORDER II. DYSOREXIÆ,

(ex δυσ, bad, and ορεξις, appetite).

False or defective appetite.

§ 1. *False Appetite.*

C. INSATIABLE HUNGER (BULIMIA; ex βους,
an ox, and λιμος, hunger).

Appetite for a greater quantity of food than can be digested.

¶ 1. *The Idiopathic.*

1. The Bulimia of Gluttons (*Bulimia belluonum*) without disease of the stomach, with an appetite for a greater quantity of food than usual.

2. The fainting Bulimia (*syncopalis*) with frequent desire of food, from a sense of hunger threatening syncope.
3. The Bulimia from vomiting (*emetica*) with desire of food in great quantity, which is immediately vomited up again.

2. *The Symptomatic.*

CI. EXCESS OF THIRST (POLYDIPSIA; ex πολυξ, *much*, and διψος, *thirst*).

Præternatural thirst.

Vide vol. IV. p. 146.

CI. LONGING, OR FALSE APPETITE (PICA).

A desire of eating what is not food.

Vide vol. III. p. 46.

CII. SATYRIASIS (σατυριασις, *a distension of the penis*).

Excessive desire of venery in men.

1. The youthful Satyriasis (*juvenilis*) with præternatural desire of venery, while the body is at the same time little disordered.
2. The ungovernable Satyriasis (*furens*), with uncontrollable desire of venery, while the body is at the same time much disordered.

CIII. NYMPHOMANIA (ex νυμφη, *nymphæ*, and μανια, *inordinate passion*).

Uncontrollable desire of venery, in women.

CIV. NOSTALGIA (ex νοστέω, to return, and αλγος, sick).

A vehement desire of revisiting their native country, in persons absent from it.

Its varieties are,

1. The simple Nostalgia (*simplex*), without any other disease.
2. The complicated Nostalgia (*complicata*), accompanied with other diseases.

§ 2. *Defective Appetites.*

CVI. ANOREXIA (ex α neg. and ορεξις, appetite).

Want of appetite for food.

Its varieties are,

1. The humoral Anorexia (*humoralis*), from humour loading the stomach.
2. The atonic Anorexia (*atonica*), from loss of tone in the fibres of the stomach.

CVII. WANT OF THIRST (ADIPSIA; ex α neg. and διψος, thirst.

Total want of desire for drink.

CVIII. ANAPHRODISIA (ex α priv. and αφροδισια, venery).

Defect of desire for venery.

ORDER III. DYSCINESIÆ,

(ex *δυσ*, *bad*, and *κινεω*, *I move*).

Obstructed or depraved motions, from a fault in the organs.

CIX. LOSS OF VOICE (APHONIA; ex *a* neg. and *φωνη*, *voice*).

Total suppression of the voice, without coma or syncope.

Its varieties are,

1. The guttural Aphonia (*gutturalis*), from swelling of the fauces and glottis.
2. The tracheal Aphonia (*trachealis*), from compression of the trachea.
3. The atonic Aphonia (*atonica*), from injury of the nerves of the larynx.

CX. DUMBNESS (MUTITAS: ex *μωτης*, *dumb*).

Incapacity of speaking.

Its varieties are,

1. The organic Mutitas (*organica*), from loss or disease of the tongue.
2. The atonic Mutitas (*atonica*), from injury of the nerves of the tongue.
3. Mutitas of Deafness (*sudorum*), from being born deaf, or from loss of hearing in early years.

CXI. PARAPHONIA (ex παρα, *wrong*, and φωνη, *sound*).

Depraved sound of voice.

Its varieties are,

1. The Paraphonia of Puberty (*puberum*), or the voice changed, about the age of puberty, from an acute and soft to a grave and harsh tone.
2. Paraphonia, with Hoarseness (*rauca*), from dryness or flaccid tumour of fauces, the voice hoarse and rough.
3. The resounding or nasal Paraphonia (*resonans*), from obstruction in the nostrils, the voice rough, with a hissing sound in the nose.
4. The rough palatine Paraphonia (*palatina*), from the uvula being wanting or divided, and in general attended with a hare-lip; the voice rough, obscure, and disagreeable.
5. The ringing Paraphonia (*clangens*); the voice assuming an acute, shrill, and weak tone.
6. The snoring Paraphonia (*comatosa*), from laxity of the velum palati and of the glottis; a sound emitted at inspiration.

CXII. PSELLISMUS (ex σπιλισμα, *hesitation of speech*).

Faulty articulation.

Its varieties are,

1. The stammering Psellismus (*hesitans*), or where, in speaking, the words, and chiefly the first words, are with difficulty uttered, and the first syllable only frequently repeated.

2. The ringing Psellismus (*ringens*); or, where the sound of the letter R is always aspirated, and, as it were, doubled.
3. The lallant Psellismus (*lallans*), the sound of the letter L made more soft, or pronounced instead of the letter R.
4. The soft Psellismus (*emolliens*), the harsher letters changed into softer ones, and the letter S much used.
5. The balbutient Psellismus (*balbutiens*), from a large or swollen tongue, and when the labial letters are much founded, and often used instead of others.
6. The labid Psellismus (*acheilos*), or impossibility or difficulty of pronouncing the labial letters.
7. The guttural Psellismus (*lagostomatium*), where, from the palate being divided, the guttural letters are not justly pronounced.

CXIII. STRABISMUS (ex στραβίζω, to squint).

The optic axes of the eyes not converging.

Its varieties are,

1. The habitual Strabismus (*habitualis*), from a depraved custom of using one eye only.
2. The accommodating Strabismus (*commodus*), from debility or greater mobility of one eye, so that both cannot be mutually employed.
3. The unavoidable Strabismus (*necessarius*), from altered situation or figure of certain parts of the eye.

CXIV. DYSPHAGIA (ex δυσ, bad, and φάγω, to eat).

Impeded deglutition, without phlegmasia or the respiration being affected.

CXV. CONTRACTION (CONTRACTURA).

The continued and rigid contraction of one or more of the joints.

Its varieties are,

1. The primary Contraction (*Contractura primaria*), from the muscles being contracted and rigid, in consequence of

a. Inflammation.

b. Spasm.

c. Paralysis of their antagonists.

d. Irritating acrimony.

2. The articular contraction (*articularis*), from rigidity of a joint.

ORDER IV. INCREASED DISCHARGES (APOCENOSES,
ex αποκινωω, *I move from*).

Unusual flux of blood or other humours, without fever or increased force of circulation.

CXVI. PROFUSIO.

Flux of blood.

CXVII. EPHIDROSIS, (ex επιδρωσις, *abundant in water*).

Excessive sweating.

CXVIII. EPIPHORA (ex ἐπιφορα, *a flood*).

Morbid flow of tears, or the lacrymal fluid.

- ¶ 1. The Idiopathic.
2. The Symptomatic.

CXIX. SALIVATION (PTYALISMUS, ex πτυαλιζω, *to spit often*).

Morbid discharge of saliva.

CXX. ENURESIS (ex ενυρεω, *to be unable to retain urine*).

Involuntary flow of urine without pain.

1. The atonic Enuresis (*atonica*), after diseases injuring the sphincter of the bladder.
2. Slow irritation (*Enuresis irritata*), in consequence of compression or irritation of the bladder.

Vide vol. II. p. 323.

CXXI. GONORRHŒA (ex γονη, *the seed*, and ῥεω, *to flow*).

In men, a morbid discharge of fluid from the urethra, with or without venereal desire.

Vide vol. I. p. 132.

1. The pure (*Gonorrhœa pura*), without previous impure copulation, flux of a humour-like pus from the urethra, without suppression of urine or libidinous inclination.
2. The impure (*Gonorrhœa impura*), after impure co-

pulation, flux of a puriform humour from the urethra, with difficulty of making water.

This is followed by

The mucous Gonorrhœa, or gleet (*mucosa*), after Gonorrhœa impura, flux of a mucous humour from the urethra, with little or no difficulty of making water.

A GLEET.

3. Great debility, termed Seminal Weakness (Gonorrhœa *laxorum*), distillation of a humour, in general pellucid, from the urethra, without erection of the penis, but with libidinous inclination when the person is awake.
4. The sleeping Gonorrhœa (*dormentium*), emission of the seminal fluid, with erection and lustful inclination of persons asleep, from impure dreams.

Spurious species, where there is no flux from the urethra.

ORDER V. EPISCHESES,

(*ex επισχω, to stop*).

Suppression of Excretions.

CXXII. OBSTIPATIO.

No discharge of fæces, or but seldom.

Vide vol. I. p. 209.

1. The obstipation from weakness (*debilium*), in persons of a lax, weak, and in general dyspeptic habit.
2. Obstipation from rigidity (*rigidorum*), in persons of a rigid, often hypochondriac temperament.
3. The Obstipation from obstruction (*obstructorum*), with symptoms of colic.

CXXIII. ISCHURIA (ex *εσχω* to restrain, and *ουρον*, urine).

Vide vol. II. p. 318.

1. The renal Suppression (*Ischuria renalis*), succeeding disease of the reins, with pain or uneasy sensation of weight in the region of the reins, and without swelling of the hypogastrium, or desire of making water.
2. The ureterical Suppression (*Ischuria ureterica*), succeeding disease of the reins, with pain or uneasy sensation in some part of the ureters, and without swelling of the hypogastrium, or desire of making water.
3. The vesicular, or water-suppression (*Ischuria vesicalis*), with swelling of the hypogastrium, pain at the neck of the bladder, and frequent desire of making water.
4. The urethral Suppression (*Ischuria urethralis*), with swelling of the hypogastrium, frequent desire of making water, and pain in some part of the urethra.

CXXIV. DYSURIA (ex *δυσ*, difficult, and *ουρον*, urine).

Painful, and sometimes obstructed emission of urine.

Vide vol. II. p. 318.

1. The ardent (*Dysuria ardens*), with burning heat in the urine, without any evident disease of the bladder.
2. The spasmodic (*Dysuria spasmodica*), from spasm of other parts communicating with the bladder.
3. The Dysuria from compression (*compressionis*), from pressure of the bladder by the neighbouring parts.
4. The inflammatory (*Dysuria phlogistica*), from inflammation of the adjacent parts.
5. The Dysuria from irritation (*irritata*), with symptoms of the stone.
6. The mucous Dysuria (*mucosa*), with copious excretion of mucus.

CXXV. DYSPERMATISMUS (ex *δυσ*, *bad*, and *σπέρμα*, *seed*).

In the venereal act, the emission of semen slow, obstructed, or insufficient for the purpose of generation.

1. The urethral Dyspermatismus (*urethralis*), from disease of the urethra.
2. The knotty or nodose Dyspermatismus (*nodosus*), from nodes in the corpora cavernosa.
3. The preputial Dyspermatismus (*præputialis*), from too narrow opening of the prepuce.
4. The mucous Dyspermatismus (*mucosus*), from mucus clogging the urethra.
5. The over-erected Dyspermatismus (*hypertonicus*), from too great erection of the penis.
6. The epileptic Dyspermatismus (*epilepticus*), from spasmodic epilepsy, coming on in coitu.
7. The indolent Dyspermatismus (*apræstodes*), from sluggishness of the genitals.
8. The refluxent Dyspermatismus (*refluus*), no emission of semen in coitu, occasioned by its reflux out of the urethra into the bladder.

With regard to the Dyspermatismus serosus, I am not certain.

CXXVI. AMENORRHŒA (ex *α neg.* and *μηνς*, *the menses*).

Vide vol. I. p. 105.

The menses, in women not pregnant, either smaller in quantity than common, or totally obstructed.

CLASSIFICATION.

1. Green sickness (*Amenorrhœa emansiois*), in females, after the age of puberty, the menses not appearing, with, at the same time, various morbid affections.
2. The suppression of the Menses (*Amenorrhœa suppressionis*), in adults, suppression of the menses, after they have appeared.
3. The difficult discharge of Menses (*Amenorrhœa difficilis*, the menses flowing but in sparing quantity, and with pain.

ORDER VI. TUMORES.

Increased bulk of a part without inflammation.

CXXVII. ANEURISMA (*ex ανευρισμος, dilatation*).

Soft tumor, with pulsation, on an artery.

Vide vol. II. p. 82.

CXXVII. VARIX.

Soft tumor, without pulsation, on a vein.

CXXIX. ECCHYMOMA (*ex εκχυμοσις, extravasation of blood*).

Diffuse tumor, little elevated and somewhat livid.

CXXX. SCIRRHUS (*ex σκίρρος, a chip of marble*).

Hard tumor of a particular part, mostly of a gland, without pain.

Vide vol. II. p. 259 and 294.

CXXXI. CANCER.

Painful scirrhus tumor, ending in a foul ulcer.

Vide vol. II. p. 204; and vol. II. p. 113.

CXXXII. BUBO (ex *βουλον*, a swelling in the groin).

Suppurating tumor of a conglobate gland.

Vide vol. I. p. 154; vol. II. p. 132.

CXXXIII. SARCOMA (ex *σαρξ*, flesh).

Soft excrescence, not painful.

CXXXIV. VERRUCA.

Hard, rough excrescence.

Vide vol. II. p. 157.

CXXXV. CLAVUS.

Lamellated induration of the cuticle.

Vide vol. II. p. 144.

CXXXVI. LUPIA.

Moveable swelling under the skin, soft, and not painful.

CXXXVII. GANGLION.

Hard, moveable swelling, seated on a tendon.

Vide vol. II. p. 152.

CXXXVIII. HYDATIS (ex *ὕδατις*, a bladder).

Vesicle upon the skin, full of an aqueous humour.

Vide vol. II. p. 144.

CXXXIX. HYDARTHROS (ex *ὕδωρ*, water, and *αρθρον*, a joint).

Tumor of the joints, chiefly of the knee, not much raised at first, of the same colour with the skin, very painful, and diminishing the power of motion.

Vide vol. II. p. 154.

CXL. EXOSTOSIS, ($\epsilon\zeta$, and $\sigma\sigma\tau\epsilon\sigma\nu$, *a bone*).

Hard tumor, seated on a bone.

Vide vol. II. p. 161.

ORDER VII. ΕΚΤΟΠΙÆ (ex
 $\epsilon\kappa\tau\omicron\pi\iota\zeta\omega$, *I thrust out*).

A swelling arising from a part thrust out of its proper place.

CXLI. HERNIA.

Ectopia of a soft part, still covered with the skin and other integuments.

Vide vol. II. p. 286.

CXLII. PROLAPSUS.

Ectopia of a soft part, not covered.

Vide vol. II. p. 326.

CXLIII. LUXATIO.

A bone thrust out of its proper place.

Vide vol. II. p. 356.

ORDER VIII. SOLUTIONS OF CONTINUITY (DIALYSES,
 $\epsilon\kappa\ \delta\iota\alpha\lambda\upsilon\sigma\iota$, *to dissolve*).

Division of a part, manifest to inspection or feeling.

CXLIV. A WOUND (VULNUS).

A recent solution of substance in a soft part, the effect of external injury.

Vide vol. II. p. 9.

CXLV. ULCUS.

A chronic solution of a soft part, with a vitiated discharge.

Vide vol. II. p. 88.

CXLVI. HERPES.

Numerous pustules, or little ulcers, in clusters, spreading, and difficult to heal.

Vide vol. I. p. 220; vol. II. p. 109; and vol. IV. p. 120.

CXLVII. TINEA.

Small ulcers at the roots of the hair, upon the scalp, discharging a humour, and ending in a whitish, crumbly scab.

Vide vol. I. p. 222.

CXLVIII. PSORA.

Pustules and small itchy ulcers, contagious, affecting the hands,

Vide vol. I. p. 223.

CXIX. FRACTURE (FRACTURA).

A part or parts of a bone violently separated into fragments.

Vide vol. II. p. 339; and vol. IV. p. 164.

CL. CARIES.

Ulcerated state of a bone.

Vide vol. II. p. 99.

FINIS.





